

P 06000002992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

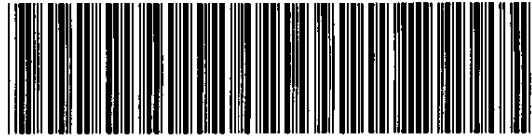
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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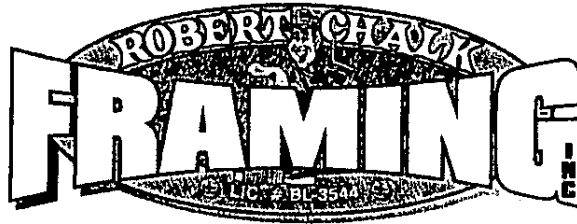
05/04/09--01026--022 **35.00

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09 MAY -4 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R-A. Chong
C.COULLIETTE

MAY 08 2009

EXAMINER



Commercial • Residential
4855 State Road 207 • Elkton, Florida 32033

**To: Sylvia Gilbert
Regulatory Specialist**

**Re: Robert Framing, Inc.
Document# P06000002992**

Please find enclosed 2 checks, 1 in the amount of \$150.00 for the fee of filing our annual report, and another 1 in the amount of \$35.00 for the fee of changing/updating our registered agent and/or addresses.

I know I had sent in a check for the registered agent change and I had called you to send it back to me, I thought that I could change it online, I had already printed out the check voucher. Please forgive me, I'm new to all of this and just didn't understand. Now I know. If you have any questions, please don't hesitate to give me a call. I apologize for any inconvenience I may have caused.

Thanks for all of your help.

**Sincerely,
Tammy Chalk
S.T. Robert Chalk Framing, Inc.
4855 SR 207
Elkton, Fl. 32033**

**Tel 904-692-1374 • Fax 904-692-1375
Cell 904-219-8525 • robertchalkframing@windstream.net**

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Robert Chalk Framing, Inc.
Name of Corporation

DOCUMENT NUMBER: P06000002992

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tammy Chalk
Name of Contact Person

Robert Chalk Framing, Inc.
Firm/Company

4855 SR 207
Address

Elkton, FL 32033
City/State and Zip Code

robertchalkframing@windstream.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tammy Chalk at (904) 692-1374
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Robert Chalk Framing, Inc.
2. The principal office address: 4855 SR 207
Elkton, Fl. 32033
3. The mailing address (if different): _____
4. Date of incorporation/qualification: January 6, 2006 Document number: P06000002992
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Linda D. Barker

5705 Rudolph Ave.

St. Augustine, Fl. 32080

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Tammy Chalk

2162 Century Blvd. East

P.O. Box NOT acceptable

St. Augustine, Fl. 32084

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09 MAY - 4 PM 3 08
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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Tammy Chalk
Signature of an officer or director

Tammy Chalk
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Tammy Chalk
Signature of Registered Agent

4/30/09
Date

If signing on behalf of an entity:

Typed or Printed Name

***** FILING FEE: \$35.00 *****