## P06000034171

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PICK-UP	☐ WAIT	MAIL	ļ
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Certified Copies	Certificates	of Status	
Special Instructions to	Filing Officer:		
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Office Use Only



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## COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Hammer For Hire, Inc. (Name of Corporation)			
DOCUMENT NUMBER: P06000034 171			
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:			
Jeremy Kenneloeck (Name of Contact Person)			
Hammer For Hire, Inc. (Firm/Company)			
19915 Bluff Oak Blvd. (Address)			
Tampa, FL 33647 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Jeremy Keunebeck at (813) 943-3280 (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.			

o once 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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2008

JEREMY KENNEBECK HAMMER FOR HIRE, INC. 19915 BLUFF OAK BLVD TAMPA, FL 33647

SUBJECT: HAMMER FOR HIRE, INC.

Ref. Number: P06000034171

We have received your document for HAMMER FOR HIRE, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 808A00015927

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RECEIVE

## 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.
1. The name of the corporation: Havnmer For Hire, Inc.
2: The principal office address: 19915 Bluff Oak Blud. Tampa, FL 3364
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/8/06 Document number: P0600034171
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Business Support Inc.
417 Stowe Ave, Suite A
Orange Park, FL 32073
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):    Second   Property   Property
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.
Signature of an officer or director)  Jeveny Kewebeck President  (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.
(Signature of Registered Agent)  (Signature of Registered Agent)
If signing on behalf of an entity:
Jereny Kennebell (Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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