

P06000062515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000181318700

05/27/10 -01015--023 **35.00

FILED
2010 MAY 27 P 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NO change
Fleuri
5-27-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Property Services of Orlando, Inc.
Name of Corporation

DOCUMENT NUMBER: P06000062515

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:

Scott Hampton
Name of Contact Person

Property Services of Orlando, Inc.
Firm/Company

7524 Municipal Drive
Address

Orlando FL 32819
City/State and Zip Code

SCOTT@LEASINGORLANDO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Hampton at (407) 253-9324
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Property Services of Orlando, Inc.
2. The principal office address: 7524 Municipal Drive
Orlando, FL 32819
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 5-2-06 Document number: PD6000062-515
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)

Scott A. Hampton
7524 Municipal Drive
Orlando FL 32819

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

P.O. Box NOT acceptable

FILED
2010 MAY 27 P 12:08
SECRETARY OF STATE
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.

[Signature]
Signature of an officer or director

Scott Hampton, 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]
Signature of Registered Agent

05/18/10
Date

If signing on behalf of an entity:

Scott Hampton
Typed or Printed Name

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