P06000070063

(Re	questor's Name)	
(Ad	dress)	•
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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SECRETARY OF STATE
TALL AHASSEF FLORID

R.A. Change

C.COULLIETTE

DEC 182008

EXAMINER

COVER LETTER

Division of Corporations			
SUBJECT: IRON BRIDGE TOOLS, INC.	 		
(Name of Corporat	ion)		
DOCUMENT NUMBER: P06000070063			
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:			
·	J		
FRANK SMITH,	ESQ.		
(Name of Contact Person)			
INFANTE, ZUMPANO, HUDSON & MILOCH, LLC (Firm/Company)			
(Firm/Company)			
500 S. DIXIE HIGHWAY, SUITE 302			
(Address)			
CORAL GABLES, FL 33146 (City/State and Zip Code)			
For further information concerning this matter, please call:			
FRANK SMITH at (786) 345-2120		
(Name of Contact Person) (786) 345-2120 Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section		
Amendment Section Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		
	Tallahassee, FL 32301		

TO:

Amendment Section

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: IRON BRIDGE TOOLS, INC.
2. The principal office address: C/O INFANTE, ZUMPANO, HUDSON & MLOCH, LLC
500 S, DIXIE HIGHWAY, SUITE 302, CORAL GABLES, FL 33146
3. The mailing address (if different):
4. Date of incorporation/qualification: <u>5/18/2006</u> Document number: <u>P06000070063</u>
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)
C/O L.M. PLOUCHA, ESQ.
100 SE 3RD AVE. STE 1400
FT. LAUDERDALE, FL 33394
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
C/O INFANTE, ZUMPANO, HUDSON & MILOCH, LLC
500 S. DIXIE HIGHWAY, SUITE 302 (P.O. Box NOT acceptable)
CORAL GABLES, FL 33146
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) WENN ROBINSON, 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)
If signing on behalf of an entity:
Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)