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I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Elpizo Corporation

Name of Corporation

DOCUMENT NUMBER: P06000073807

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 Hovater

Name of Contact Person

Elpizo Corporation

Firm/Company

8100 McGowin Drive

Address

Fairhope, AL 36532

City/State and Zip Code

jeremyhovater@segers.aero

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeremy Hovater

Name of Contact Person

at (251) 459-8302

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2017

JEREMY HOVATER
ELPIZO CORPORATION
8100 MCGOWIN DRIVE
FAIRHOPE, AL 36532

SUBJECT: ELPIZO CORPORATION
Ref. Number: P06000073807

We have received your document for ELPIZO CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the date of incorporation in part 4 of the form.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The document must also contain the address of the registered agent which must be at a Florida street address.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 217A00020421

RECEIVED
17 OCT 26 PM 12:15
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: Elpizo Corporation
2. The principal office address: 8100 McGowin Drive, Fairhope, AL 36526
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/26/2006 Document number: P06000073807
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)

Judith Wright

Same as ~~above~~ below

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

Jeremy Hovater

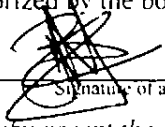
5582 Fairchild Rd

P.O. Box NOT acceptable

Crestview, FL 32539

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.

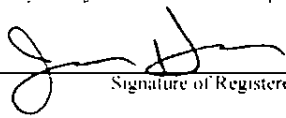


Signature of an officer or director

B.C. KOK CSO

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

10/5/17

Date

If signing on behalf of an entity:

Typed or Printed Name

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