P06000140187

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APR 1 0 2014

C. CARROTHERS

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT:

CSRock, Inc.

Name of Corporation

DOCUMENT NUMBER

P06000140187

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:

Susan Rock

Name of Contact Person

CSRock, Inc.

Firm/Company

24199 Claire St.

Address

Bonita Springs, FL 34135

City/State and Zip Code

susan-florida@comcast.net

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

For further information concerning this matter, please call:

Susan Rock

, 239

390-9195

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: CSRock, Inc.
	l office address: 24199 Claire St prings, FL 34135
3. The mailing a	address (if different): Same
4. Date of incor	poration/qualification: 11/07/06 Document number: P06000140187
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)
	Charles Rock - Resigned
	24199 Claire St.
	Bonita Springs, FL 34135
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Susan Rock Susan Rock
	24199 Claire St. 2
	P.O. Box NOT acceptable
	Bonita Springs, FL 34135
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.
Such change wanthorized by	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Oh	Charles Rock
I hereby accept I further agree performance of	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered als document is being filed merely to reflect a change in the registered office address, I at that the corporation has been notified in writing of this change. 3 -21 - 44
If signing on be	ehalf of an entity:
CSRock, In	•
Т	Typed or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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