

PD8000014017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

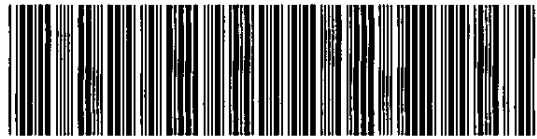
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TALLAHASSEE, FLORIDA

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4-30-09

COVER LETTER

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2009 APR -7 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Amendment Section
Division of Corporations

SUBJECT: CAREY, INC.

(Name of Corporation)

DOCUMENT NUMBER: P08000014017

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:

CHRIS CAREY

(Name of Contact Person)

CAREY, INC.

(Firm/Company)

14332 SW 160TH TERR

(Address)

MIAMI FL 33177

(City/State and Zip Code)

For further information concerning this matter, please call:

CHRIS CAREY

(Name of Contact Person)

at (305) 588-0159

(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

April 8, 2009

CHRIS CAREY
CAREY, INC.
14332 SW 160TH TERR
MIAMI, FL 33177

SUBJECT: CAREY, INC.
Ref. Number: P08000014017

We have received your document for CAREY, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 509A00011764

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2009 APR 28 AM 8:00
SECRETARY OF STATE
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: CAREY, INC.
2. The principal office address: 14332 SW 160TH TERR
MIAMI FL 33177
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/06/2008 Document number: P08000014017
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

A1A REGISTERED AGENT INC.

5647 110TH AVENUE NORTH

ROYAL PALM BEACH, FL 33411

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

CHRIS CAREY

14332 SW 160TH TERR

(P.O. Box NOT acceptable)

MIAMI FL 33177

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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.

C. Carey
(Signature of an officer or director)

CHRIS CAREY, 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.

C. Carey
(Signature of Registered Agent)

4/2/09
(Date)

If signing on behalf of an entity:

CHRIS CAREY

(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)