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MAR 2 9 2012 T. ROBERTS

COVER LETTER

SUBJECT: CORACO, INC. Name of Corporation	
Name of Corporation	
DOCUMENT NUMBER: P08000071567	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to the following:	
John Rachide	
Name of Contact Person	
CoRaCo, Inc.	
Firm/Company	
1403 57th Avenue West	
Address	
•	
Bradenton, FL 34207	
City/State and Zip Code	
ionront@vahaa aam	
jenrent@yahoo.com E-mail address: (to be used for future annual report notific	eation)
2 man dudress. (to be used for future difficult report flotific	action)
For further information concerning this matter, please call:	
John Rachide at (941)	224-9085
ai i	e Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Division of Comparations Street Address: Amendment Sec	
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive	•

Tallahassee, FL 32301

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a c	orporation organized	507.1508, or 617.1508, Flo d under the laws of the Stat d agent, or both, in the State	e of Florida
1. The name of	the corporation: COR	ACO, INC.		
			West, Bradenton, FL	34209
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: _	07/28/2008	Document number:	P08000071567
	d street address of the curtment of State: (If resign		t and registered office on fi	ile with the Research 128
	John Rachide			
	1043 57th Avenue	West		SEE FLORESTE
	Bradenton, FL 342	207		FLOR STATE
6. The name and (if changed):	d street address of the ne	w registered agent (i	f changed) and /or registere	ed office
	John Rachide			
	1403 57th Avenue			
	D 1 51 046	P.O. Box NOT acc	ceptable	
	Bradenton, FL 342			
The street address changed will	ess of its registered offi I be identical.	ce and the street add	fress of the business office	e of its registered agent,
Such change was authorized by the	as authorized by resoluthe board, or the corpora	tion duly adopted by tion has been notifi	y its board of directors or led in writing of the change	by an officer so e.
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ire of an officer or director	<u> </u>	John Rachide,	Treasurer
hereby accept	the appointment as rec	ristered agent and a visions of all statutes ad accept the obliga ct a change in the re g of this change.	gree to act in this capacity s relative to the proper an tion of my position as regi egistered office address, I	
//h	nature of Registered Agent	<u> </u>	03/26/20 Date	012
	chalf of an entity:		Date	
T	yped 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