P0900012028

(Reque	stor's Name)	
(Addres	s)	
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(City/St	ate/Zip/Phone #)	1
PICK-UP	WAIT	MAIL
(Busine	ss Entity Name)	
(Docum	ent Number)	
Certified Copies	Certificates of	Status
Certified Copies	Certificates of	Status
		:
Special Instructions to Filin	g Officer:	
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Office Use Only



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Roberts TJAN 0 5 2010



December 23, 2009

CLOVER SHEAREY CC STORES ONLINE, INC. 3000 GULF TO BAY BLVD, STE 403 CLEARWATER, FL 33759

SUBJECT: CC STORES ONLINE, INC.

Ref. Number: P09000012028

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

The registered agent must sign accepting the designation.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 509A00039050

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT:	CC Stores Online,	Inc.		
	Name of Corporati	on		
DOCUMENT NUMBER:	P0900001	2028		
The enclosed Statement of Change	of Registered Office/Agent	and fee are submitted for filing.		
Please return all correspondence co	oncerning this matter to the t	following:		
				
	Clover Sheare Name of Contact Per	у		
	Name of Contact Per	son		
	CC Stores Online,	Inc.		
	Firm/Company			
	3000 Gulf to Bay Blvd,	Suite 403		
	Address			
	Cloopyston El 22	750		
Clearwater, FL 33759 City/State and Zip Code				
_				
E-mail address	s: (to be used for future an	nual report notification)		
For further information concerning	this matter, please call:			
Clover Shear	ev at (727 \ 791_0182		
Name of Contact Pe	rson A	727 791-0182 rea Code & Daytime Telephone Number		
		•		
Enclosed is a \$35.00 check made page	ayable to the Department of	State.		
Mailing Ac	1d voce	Street Address		
Amendme	nt Section	Street Address: Amendment Section		
Division o	of Corporations	Division of Corporations		
P.O. Box	6327	Clifton Building		
Tallahasse	e, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this pange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: CC Stores Online, Inc.,
2. The principa	office address: 3000 Gulf to Bay Blvd, Suite 403
Clearwate	er, FL 33759
3. The mailing	address (if different):
4. Date of incor	rporation/qualification: 02/06/09 Document number: P09000012028
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)
	Corporation Service Company
	1201 Hays Street
	Tallahassee, FL 32301
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Clover Shearey 73
	Clover Shearey 3000 Gulf to Bay Blvd, Suite 403
	1.0. Hox Not acceptable
	Clearwater, FL 33759
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 w authorized by	ras authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
Signatu	Clover Shearey, President Printed or typed name and title
of my duties, ar	t 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 performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filled merely to reflect a change in the registered office address, I hereby confirm that the is been followed in writing of this change.
	gnature of Registered Agent Date
_ U	ehalf of an entity: When the state of the s
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314