

PO 9000016713

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** WOODWORKING BY ERNIE INC  
Name of Corporation

**DOCUMENT NUMBER:** P09000016713

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:

HERNANI P SIMOES

Name of Contact Person

WOODWORKING BY ERNIE INC

Firm/Company

146 MUIRFIELD CIRCLE

Address

NAPLES, FL 34113

City/State and Zip Code

simoeshernani@aol.com

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

For further information concerning this matter, please call:

HERNANI SIMOES

Name of Contact Person

at ( 239 )

784-7349

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

March 8, 2010

HERNANI SIMOES  
146 MUIRFIELD CIRCLE  
NAPLES, FL 34113

SUBJECT: WOODWORKING BY ERNIE, INC.  
Ref. Number: P09000016713

We have received your document for WOODWORKING BY ERNIE, 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 FORM SUBMITTED IS FOR AN ALIEN BUSINESS ORGANIZATION. THE ABOVE ENTITY IS A FLORIDA DOMESTIC CORPORATION. THE WRONG FORM HAS BEEN SUBMITTED.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson  
Document Specialist Supervisor

Letter Number: 410A00005558

RECEIVED  
2010 MAR 17 AM 8:09  
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: WOODWORKING BY ERNIE INC

2. The principal office address: 3920 PROGRESS AVE. UNIT 110 NAPLES, FL 34104

3. The mailing address (if different): 146 MUIRFIELD CIRCLE, NAPLES, FL 34113

4. Date of incorporation/qualification: 02/23/2009 Document number: P09000016713

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)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALAHASSEE, FL 32301

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

HERNANI P SIMOES

146 MUIRFIELD CIRCLE

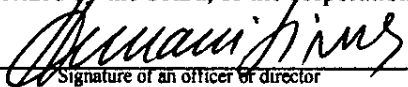
P.O. Box NOT acceptable

NAPLES, FL 34113

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TALLAHASSEE, FLORIDA


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

HERNANI P SIMOES, Officer  
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

03/14/2010  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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)