P09000035472

(Requestor's Name)					
(Address)					
· (Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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177-15 NA



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2011

DON MCCHESNEY EQUIP EDUCATION 14359 MIRAMAR PKWY, STE 348 MIRAMAR, FL 33027

SUBJECT: EQUIP EDUCATION, INC.

Ref. Number: P09000035472

We have received your document for EQUIP EDUCATION, 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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: 711A00005338

COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: Equip Educa Name of C	tion, Inc.					
DOCUMENT NUMBER: P09	000035472					
The enclosed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matte	r to the following:					
Don McChesney						
Name of Contact Person						
Equip Education, Inc. Firm/Company						
14359 Miramar P	arkway, Suite 348					
	ress					
Miramar,	FL 33027					
Miramar, FL 33027 City/State and Zip Code						
.don@equipe	ducation.org					
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please	call:					
Don McChesney	796					
Name of Contact Person	at (786) 863-0498 Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Depar	tment of State.					
Mailing Address: Amendment Section	Street Address: Amendment Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	Clifton Building					
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301					

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

statement of cha	nge is submitted for a co	rporation organized	607,1508, or 617,1508, Flo d under the laws of the Stat l agent, or both, in the State	_{e of} Florida		
1. The name of	the corporation: Equip	Education, In	IC .			
	office address: 14359					
3. The mailing a	ddress (if different): SA	ME				
4. Date of incorp	poration/qualification:	04/21/2009	Document number:	P09000035472		
	I street address of the cur 1ment of State: (If resign		t and registered office on fi	le with the		
	United States Corporation Agents, Inc.					
	13302 Winding Oaks Blvd., A-100					
	Tampa, FL 33612					
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	Don McChesney		 			
	3700 SW 136th Av					
	P.O. Box NOT acceptable Miramar, FL 33027					
The street addre	ess of its registered office	<u>. </u>	dress of the business office	of its registered agent.		
Such change wa authorized by the	as authorized by resoluti te board, or the corporat	on duly adopted by ion has been notifi	its board of directors or led in writing of the change	by an officer so e.		
Signatur	re or an officer of arrestor	<u>EO</u>	Don C. McChesi	ney, Jr. CEO		
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as reg to comply with the provi d I am familiar with and ng filed merely to reflec been notified in writing	istered agent and a sions of all statute: I accept the ohliga t 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	y, d complete performance stered agent. Or, if this hereby confirm that the		
Sig	nature of Registered Agent		March 8,	2011		
If signing on be	half of an entity:					
	C. McChesney, Jr.					

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

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