

P09000044874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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C. MUSTAIN

RASH

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ft. Myers Wireless

(Name of Alien Business Organization)

Dear Sir or Madam:

The enclosed Statement of Change of Registered Agent/Registered Office
fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan A. Ruiz

(Name of Person)

Ft. Myers Wireless

(Firm/Company)

2924 Del Prado Blvd. S. # 6

(Address)

Cape Coral, FL 33904

(City/State and Zip Code)

For further information concerning this matter, please call:

Juan A. Ruiz

(Name of Person)

at (239)

541-8966

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 17, 2012

JUAN RUIZ
2924 DEL PRADO BLVD. S #6
CAPE CORAL, FL 33904

SUBJECT: FT. MYERS WIRELESS INC.
Ref. Number: P09000044874

We have received your document for FT. MYERS WIRELESS 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The form that was sent in is for a Alien Business Organization to change the Registered Agent.

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) 245-6050.

Carol Mustain
Regulatory Specialist II

Letter Number: 812A00018867

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FE. HARRIS WIRELESS, INC.
2. The principal office address: 2924 Del Prado Blvd S #6
Cape Coral, FL 33904
3. The mailing address (if different): 4313 S.W. 10th Ave.
Cape Coral, FL 33914
4. Date of incorporation/qualification: 05-21-2009 Document number: P09000044874
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)

Jean E. Ruiz
4313 S.W. 10th Ave
Cape Coral, FL 33914

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

Carmen M. Ruiz
4313 S.W. 10th Ave
Cape Coral, FL 33914

P.O. Box NOT acceptable

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]
Signature of an officer or director

Jean Ruiz "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.

[Signature]
Signature of Registered Agent

7-27-2012
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 (03/12)