## P0900077912

(Requestor's Name)					
(Address)					
(Address)					
(Hadioso)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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## **COVER LETTER**

	ent Section of Corporations				
SUBJECT:	ReplaceYourAcFill				
	Name of Co	rporation			
DOCUMENT N	UMBER: P090	00077912			
The enclosed Sta	tement of Change of Registered Office	Agent and fee are subm	itted for filing.		
Please return all	correspondence concerning this matter	to the following:			
	Steven W.	Grainger			
	Name of Con	tact Person			
	ReplaceYour <i>A</i>	AcFilter.com			
	Firm/Cor	npany			
5151 Sunbeam Road, Suite 2					
	Addr	ess			
	Jacksonville, F	orida 32257	<del></del>		
	·	•	,		
	steven.grainger@allwea E-mail address: (to be used for fu	ture annual report not	ification)		
η,	`	•	·		
For further inform	nation concerning this matter, please ca	ıll:			
ţ	Steven W. Grainger	at ( 904 )	781-7060		
N	ame of Contact Person	Area Code & Day	781-7060 time Telephone Number		
Enclosed is a \$35	5.00 check made payable to the Departr	nent of State.			
	Mailing Address: Amendment Section	Street Address Amendment S	<u>s:</u> Section		
	Division of Corporations	Division of C			
	P.O. Box 6327	Clifton Build	_		
	Tallahassee, FL 32314	2661 Executi Tallahassee, l	ve Center Circle 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 Stat	te of Florida		
1. The name of t	he corporation: Repla	ceYourAcFilte	er.com, Inc.			
2. The principal	office address: 5151 S	unbeam Road,	Suite 2, Jacksonville,	Florida 32257		
3. The mailing a	ddress (if different): Sar	ne				
4. Date of incorp	poration/qualification:	9/17/2009	Document number:	P09000077912		
	I street address of the curr tment of State: (If resigne		t and registered office on fi	ile with the		
	Ansbacher & Associates, P.A.					
	8818 Goodbys Executive Drive, Suite 100					
	Jacksonville, Florid	a 32217		ZOID MAR SECREI		
6. The name and (if changed):	street address of the new	registered agent (i	f changed) and /or registere	ed offices 22 -		
	Steven W. Grainge	r		AMIL: 2		
	5151 Sunbeam Ro			80°		
	Jacksonville, Florid	P.O. Box NOT acc	ceptable			
The street addre			dress of the business office	e of its registered agent,		
Such change wa authorized by th	as authorized by resoluti ne board, or the corporat	on duly adopted by ion has been notifi	y its board of directors or ed in writing of the chang	by an officer so ge.		
An Bondan	e of an officer of director	<u> </u>	Daniel Butt	lerworth U.P.		
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as regi to comply with the provi d I am familiar with and ng filed merely to reflect been notified in writing	stered agent and a sions of all statute. I accept the obliga t a change in the re of this change.	gree to act in this capacit s relative to the proper at tion of my position as reg egistered office address, I	y. d complete performance istered agent. Or, if this hereby confirm that the		
			2/25/1	0		
· ·	half of an antitue		, Date			
_	half of an entity:					
	even W. Grainger  vped or Printed Name					

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