

PD9000089357

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 SEP 28 AM 10:19

SEP 30 2015
C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tuna Fish Services, Inc.
Name of Corporation

DOCUMENT NUMBER: P09000089357

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:

Tina Arseneau
Name of Contact Person

Tuna Fish Services, Inc.
Firm/Company

6140 Bur Oaks Ln
Address

Naples FL 34119
City/State and Zip Code

mrsnite@live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tina Arseneau at (239) 287-0407
Name of Contact Person 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

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: Tuna Fish Services, Inc.
2. The principal office address: 6140 Bur Oaks Ln
Naples FL 34119
3. The mailing address (if different): 6140 Bur Oaks Ln
Naples FL 34119
4. Date of incorporation/qualification: 10/29/2009 Document number: PO9000089357
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)

ARSENEAU, TINA
5593 Hammock Isles Dr
Naples, FL 34119

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

ARSENEAU, TINA
6140 Bur Oaks Ln
P.O. Box NOT acceptable
Naples, FL 34119

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SECT. 607.0502
DIVISION OF CORPORATIONS

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.

Tina Arseneau
Signature of an officer or director

Tina Arseneau, 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.

Tina Arseneau
Signature of Registered Agent

9/24/15
Date

If signing on behalf of an entity:

TINA ARSENEAU
Typed or Printed Name

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