

P09000092647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300289544583

09/15/16--01005--015 **35.00

FILED

16 SEP 15 AM 11:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R/A-CH
ST
9/20/16

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Coast to Coast Moving and Storage, Inc.
Name of Corporation

DOCUMENT NUMBER: P09000092647

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:

George Burd

Name of Contact Person

Coast to Coast Moving and Storage, Inc.

Firm/Company

5035 Uceta Road

Address

Tampa, FL 33619

City/State and Zip Code

georgeburd@ctcms.com

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

For further information concerning this matter, please call:

George Burd

Name of Contact Person

at (**813**) **621-1003**

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: Coast to Coast Moving and Storage, Inc.
2. The principal office address: 5035 Uceta Road, Tampa, FL 33619
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/10/2009 Document number: P09000092647

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)

George Burd

5112 LeTourneau Circle

Tampa, FL 33610

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

George Burd

5035 Uceta Road


P.O. Box NOT acceptable

Tampa, FL 33619

FILED
16 SEP 15 AM 11:29
SECRETARY OF STATE
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

George Burd/CEO

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

9/12/2016

Date

If signing on behalf of an entity:

George Burd

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