

PD9 0000 97898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

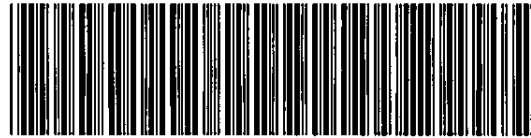
(Business Entity Name)

(Document Number)

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C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Central Florida Fireplaces & Gas Services, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P09000097898

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:

David Miller

Name of Contact Person

Central Florida Fireplaces & Gas Services, Inc

Firm/Company

2659 Mercy Drive

Address

Orlando, FL 32808

City/State and Zip Code

davidmfireplaces@aol.com

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

For further information concerning this matter, please call:

Debbie Marshall

Name of Contact Person

at ( 407 ) 466-6514

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: Central Florida Fireplaces & Gas Services, Inc.
2. The principal office address: 2659 Mercy Drive, Orlando FL 32808
3. The mailing address (if different): 17937 Ruby Lane, Groveland, FL 33736
4. Date of incorporation/qualification: 12/04/2009 Document number: P09000097898
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)

David Miller

17937 Ruby Lane

Groveland, FL 33736

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

David Miller

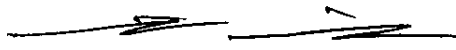
2659 Mercy Drive

P.O. Box NOT acceptable

Orlando, FL 32808

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

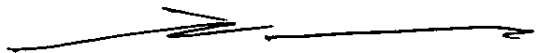
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

David Miller/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 of Registered Agent

09/17/2014

Date

If signing on behalf of an entity:

  
Typed or Printed Name

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

FILED  
SEP 25 AM 10:53  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE