

P10000030961

(Requestor's Name)

5070 MARK IV PARKWAY
FORT WORTH, TEXAS 76106

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

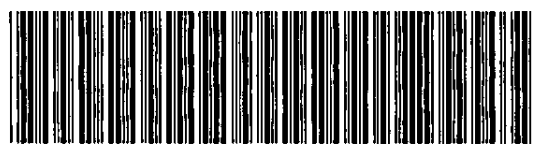
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Change

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TALLAHASSEE, FLORIDA

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7/24/13

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CORPO

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida Hearing and Telephone Corporation
(Name of Corporation)

DOCUMENT NUMBER: P10000030961

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sherrie Hernandez

(Name of Person)

Florida Hearing and Telephone Company

(Name of Firm/Company)

5070 Mark IV Parkway

(Address)

Fort Worth, TX 76106

(City/State and Zip Code)

For further information concerning this matter, please call:

Sherrie Hernandez

(Name of Person)

at **(817) 838-4742**

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RECEIVED

JUL 23 PM 2:00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2013

Florida Hearing and Telephone Corporation
5070 Mark IV Parkway
Ft. Worth, TX 76106

SUBJECT: FLORIDA HEARING AND TELEPHONE CORPORATION
Ref. Number: P10000030961

We have received your document for FLORIDA HEARING AND TELEPHONE CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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.

Annette Ramsey
Regulatory Specialist II

Letter Number: 213A00016769

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: Florida Hearing and Telephone Corporation
2. The principal office address: 5070 Mark IV Parkway
Fort Worth, TX 76106
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 04/08/2010 Document number: P10000030961

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)

Discount Registered Agent

493 Boundary Blvd.

Rotonda Wes, FL 33947

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

Capitol Corporate Services, Inc.

155 Office Plaza Drive, Suite A

P.O. Box NOT acceptable

Tallahassee, FL 32301

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.

G. Sue Harvison
Signature of an officer or director

G. Sue Harvison, Manager

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.

Delanie Case
Signature of Registered Agent

7-18-13
Date

If signing on behalf of an entity:

Delanie Case, Asst. Sec.

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)

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2013 JUL 23 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA