

P10000097915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

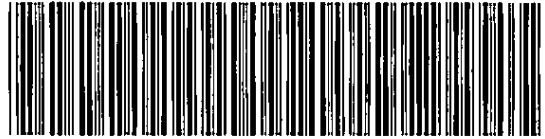
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Received Fax on 12/13/17 from
R. Warcholak correcting Registered Agent
change form.

Office Use Only



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05/04/17--01032--022 **35.00

S TALLENT
DEC 13 2017

R/A-CH

FILED
17 DEC 13 AM 10:12
5005 PARK ST. 4TH
TALLAHASSEE FL 32309



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 11, 2017

RICHARD WERCHOLUK
RED EMBER COMMUNICATIONS INC
1813 BAILLIE GLASS LN
ORLANDO, FL 32815

SUBJECT: RED EMBER COMMUNICATIONS, INC
Ref. Number: P10000097915

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 117A00009493

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Red Ember Communications Inc
Name of Corporation

DOCUMENT NUMBER: P10000097915

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:

Richard Wercholuk

Name of Contact Person

Red Ember Communications Inc

Firm/Company

1813 Baillie Glass Ln

Address

Orlando FL 32815

City/State and Zip Code

rwercholuk@redembercommunications.com ✓

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

For further information concerning this matter, please call:

Richard Wercholuk

Name of Contact Person

at (407) 803-3329

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: Red Ember Communications, Inc
2. The principal office address: 3722 Ahoya Ln Orlando FL 32837
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/03/10 Document number: P10000097915

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)

~~SHAUN D O'DELL~~
~~3722 Ahoya Ln~~
~~Orlando FL 32837~~
SHAUN D O'DELL
1813 BAILLIE GLASS LANE
ORLANDO, FL 32837

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

RICHARD WERCHOLUZE

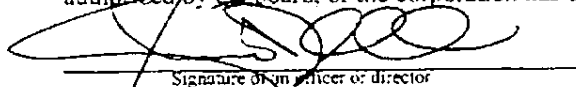
1813 Baillie Glass Ln

ORLANDO, FL 32837

P.O. Box NOT acceptable

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

Shaun D O'Dell - 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

05/02/2017

Date

If signing on behalf of an entity:

RICHARD WERCHOLUZE
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)

FILED
17 DEC 13 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA