

PI1000 10324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

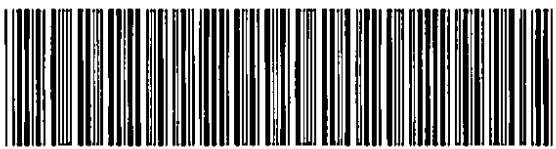
(Business Entity Name)

(Document Number)

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18 AUG 27 AM 8:04
STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hopper Dispatch, Inc
Name of Corporation

DOCUMENT NUMBER: P11000010324

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:

Melissa Rice
Name of Contact Person

Former address
1832 Penmar
Jacksonville Beach
FL 32250

new
address

Hopper Dispatch, Inc
Firm/Company

902 South East Co. Rd 245
Address

Lake City, FL 32025
City/State and Zip Code

melissa@hopperdispatch.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Rice at (904) 685-8745
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Hopper Dispatch, Inc
- 2. The principal office address: 902 South East Co. Rd 245
Lake City, FL 32025
- 3. The mailing address (if different): PO Box 2697
Lake City, FL 32025
- 4. Date of incorporation/qualification: 2009 Document number: P11000010324
- 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)

Melissa J. Rice
1832 Penman Rd
Jacksonville Beach, FL 32250

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

Melissa J. Rice
902 South East Co. Rd 245
P.O. Box NOT acceptable
Lake City, FL 32025

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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.

M June J Rice
 Signature of an officer or director

Melissa J Rice, 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.

M June J Rice
 Signature of Registered Agent

8-22-18
 Date

If signing on behalf of an entity:

Melissa J Rice
 Typed or Printed Name

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