

P110000030878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

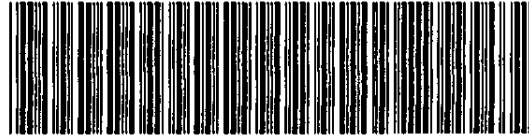
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ENTOURAGE RENTAL COMPANY INC
Name of Corporation

DOCUMENT NUMBER: P11000030878

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:

GILLIAN MURPHY

Name of Contact Person

ENTOURAGE RENTAL COMPANY INC

Firm/Company

1035 GATEWAY BLVD. #201-112

Address

BOYNTON BEACH, FL. 33426

City/State and Zip Code

PAMWATERS44@GMAIL.COM

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

For further information concerning this matter, please call:

PAM WATERS

Name of Contact Person

at (561) 389-2361
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 15, 2011

GILLIAN MURPHY
1035 GATEWAY BLVD., #201-112
BOYNTON BEACH, FL 33426

SUBJECT: ENTOURAGE RENTAL COMPANY, INC
Ref. Number: P11000030878

We have received your document for ENTOURAGE RENTAL COMPANY, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 511A00025850

**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: ENTOURAGE RENTAL COMPANY, INC
2. The principal office address: 1035 GATEWAY BLVD. #201-112 BOYNTON BEACH, FL. 33426
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/29/2011 Document number: P11000030878
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)

TIM BENTON

2696 QUANTUM LAKES DRIVE

BOYNTON BEACH, FL. 33426

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

GILLIAN MURPHY

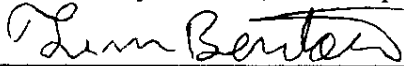
1035 GATEWAY BLVD. #201-112

P.O. Box NOT acceptable

BOYNTON BEACH, FL. 33426


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

TIM BENTON, PRES.
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

11-16-11
Date

If signing on behalf of an entity:

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 (8/05)

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TALLAHASSEE, FLORIDA