

P11000072788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF REVENUE
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@ 5/15/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Honey Badger Enterprises, Inc.
Name of Corporation

DOCUMENT NUMBER: P11000072788

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:

Margaret Louise L Crow

Name of Contact Person

Honey Badger Enterprises

Firm/Company

6845 US Hwy 90 E Ste 105-252

Address

Daphne, AL 36526

City/State and Zip Code

honeybadgerenterprises@gmail.com

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

For further information concerning this matter, please call:

Margaret Louise L Crow

Name of Contact Person

at (813) 690-4958

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

April 26, 2013

MARGARET CROW
6845 US HWY 90 E
STE 105-252
DAPHNE, AL 36526

SUBJECT: HONEY BADGER ENTERPRISES INC.
Ref. Number: P11000072788

We have received your document for HONEY BADGER ENTERPRISES 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 designation of the registered agent must be at a Florida street address.

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.

Carol Mustain
Regulatory Specialist II

Letter Number: 613A00010119

**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: Honey Badger Enterprises, Inc.
2. The principal office address: 6845 US Hwy 90 E Ste 105-252
Daphne, AL 36526
3. The mailing address (if different): same

4. Date of incorporation/qualification: 08/16/2011 Document number: P11000072788

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)

Jon Bryan Crow

14104 Knottingsley Place

Tampa, FL 33624

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

David Rankin

18540 N. Dale Mabry Hwy

P.O. Box NOT acceptable

Lutz, FL 33548

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.

 President
Signature of an officer or director

Jon Bryan Crow, 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

5/8/13
Date

If signing on behalf of an entity:

Honey Badger Enterprises, Inc.

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
STATE
DIVISION OF CORPORATIONS
13 MAY 15 PM 9:15