

P110000091244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
2017 MAY 26 PM 3:21

MAY 30 2017

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COVER LETTER

TO: Amendment Section
Division of Corporations

RECEIVED
DIVISION OF CORPORATIONS
2017 MAY 26 PM 3:22

SUBJECT: A&R Naples, Inc DBA: Coit Services Naples & Jacksonville
Name of Corporation

DOCUMENT NUMBER: CR2E045 P11808891244

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:

Benjamin Bauzon
Name of Contact Person

Coit Cleaning & Restoration Services
Firm/Company

4850 Collins Rd, Ste 106
Address

Jacksonville, FL 32244
City/State and Zip Code

ben.bauzon@gmail.com; coit028@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Benjamin Bauzon at (904) 219-4331
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

RECEIVED
17 MAY 26 PM 2:50

RECEIVED
DIVISION OF CORPORATIONS

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: A & R Naples, Inc. DBA: Coit Services of Naples & Jacksonville

2. The principal office address: 4850 Collins Road, Ste 106, Jacksonville, FL 32244

3. The mailing address (if different): Same as above

4. Date of incorporation/qualification: _____ Document number: P11000091244

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)

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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

Benjamin Bauzon

4850 Collins Road, Ste. 106

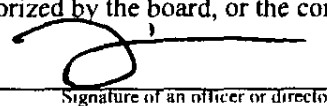
P.O. Box NOT acceptable

Jacksonville, FL 32244

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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.



Signature of an officer or director

Benjamin Bauzon

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

5/23/2017

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 (03/12)