

P11000100316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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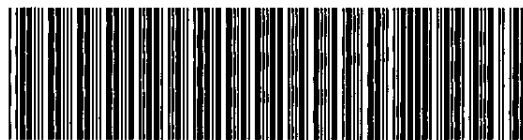
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RA address
Change

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TALLAHASSEE, FLORIDA

DOOR
1/13/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RYAN K. WEAKLEY, INC
Name of Corporation

DOCUMENT NUMBER: P11000100316

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:

Ryan Keith Weakley
Name of Contact Person

Ryan K. Weakley Inc
Firm/Company

200 2nd Ave South #116
Address

ST. PETERSBURG, FL 33701
City/State and Zip Code

WEAKR10@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ryan K. Weakley at (615) 426 7273
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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Ryan K. Weakley, Inc
2. The principal office address: 7125 FRUITVILLE RD #782
SARASOTA, FL 34240
3. The mailing address (if different): _____
4. Date of incorporation/qualification: Nov 16, 2011 Document number: P11000100316
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)

Ryan K. Weakley
7125 FRUITVILLE RD #782
SARASOTA, FL 34240

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

Ryan K. WEAKLEY
200 2nd AVE South #116
P.O. Box NOT acceptable
ST. PETERS BURG, FL 33701

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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]
Signature of an officer or director

Ryan Keith Weakley
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]
Signature of Registered Agent

1.8.2012
Date

If signing on behalf of an entity:

Ryan K. Weakley
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