

P110000104479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

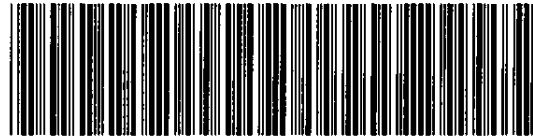
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400238423274

08/15/12--01011---002 **35.00

FILED
12 AUG 15 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

AUG - 2012

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLORIDA GENERAL INSPECTIONS
Name of Corporation

DOCUMENT NUMBER: P11000104479

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:

JOHN A. DIAZ
Name of Contact Person

FLORIDA GENERAL INSPECTIONS
Firm/Company

905 LYtle ST
Address

WEST PALM BCH, FL 33405
City/State and Zip Code

JOHN@FLORIDA GENERAL INSPECTIONS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN A. DIAZ at (561) 855-2000
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 _____

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

1. The name of the corporation: FLORIDA GENERAL INSPECTIONS
2. The principal office address: 905 LYTLE ST WEST PALM BCH, FL 33405
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 12/7/2011 Document number: P11000104479
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)

BUSINESS FILINGS INC

515 E PARK AVE

TALLAHASSEE, FL 32301

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

JOHN A. DIAZ

905 LYTLE ST

P.O. Box NOT acceptable

WEST PALM BCH, FL 33405

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 AUG 15 AM 9:45

FILED

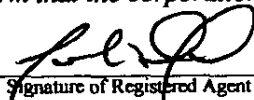
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

JOHN A. DIAZ - SEC.
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

8/13/2012
Date

If signing on behalf of an entity:

JOHN A. DIAZ
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