

**P12 000009826**

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

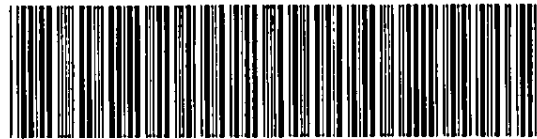
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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01/15/20--01031--029 \*\*25.00

2020 MAR 16 11:11:53

R. WHITE

MAR 18 2020



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 10, 2020

LARRY KUCKELMAN  
1809 NORTH STREET  
SENECA, KS 66538

SUBJECT: CAN AM SALES, INC.  
Ref. Number: P12000009826

We have received your document for CAN AM SALES, 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.

Rebekah White  
Regulatory Specialist II Supervisor

Letter Number: 720A00002919

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

2020/7/16 7:11:31

**SUBJECT:** Can Am Sales, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P12000009826

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:**

**Larry Kuckelman**

Name of Contact Person

Koch &amp; Co., Inc.

Fifth/Company

1809 North St.

Address

Seneca, KS 66538

City/State and Zip Code

**larry@kochandco.com**

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

**For further information concerning this matter, please call:**

**Larry Kuckelman**

at (785

336-6022

Name of Contact Person

Area Code &amp; 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**  
**The Centre of Tallahassee**  
**2415 N. Monroe Street, Suite 810**  
**Tallahassee, FL 32303**

CR2E045 (04/13)

**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: Can Am Sales, Inc.
2. The principal office address: 4941 Sorrento Court, Cape Coral, FL 33914
3. The mailing address (if different): 1809 North St., Seneca, KS 66538
4. Date of incorporation/qualification: January 30, 2012 Document number: P12000009826
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)

David W. Miller (resigned)

107 Clubhouse Lane, Apt. 391

Naples, FL 34105

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

Jim Koch

4941 Sorrento Court

P.O. Box NOT acceptable

Cape Coral, FL 33914

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

Larry Kuckelman, CFO  
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

3/10/2020  
Date

If signing on behalf of an entity:

James D. Koch  
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 (04/13)

2020 16 03 11:57