# P12-000023749

(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
, ,				
(D				
(Document Number)				
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AUG 0 4 2014 C. CARROTHERS

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	rovisions of sections 607.0502, 617.0502 ige is submitted for a corporation organi to change its registered office or registe	ized under the laws of the State of	florida	
	ne corporation: nixons home inspe	,	Torrad.	
1. The name of the	office address: 3660 coco lake driv	/A		
	reek, fl 33073			
	dress (if different):			
4. Date of incorp	oration/qualification: 03/08/12	Document number: p1200	0023749	
	street address of the current registered agment of State: (If resigned, enter resigned		ith the	
_	heather nixon			
_	5810 nw 48th ave			
-	coconut creek, fl 33073			
6. The name and (if changed):	street address of the new registered agen	t (if changed) and /or registered of	fice	
-	3660 coco lake dr			
	coconut creek, fl 33073			
	P.O. Box NOT acceptable			
The street address as changed will be	es of its registered office and the street a	address of the business office of it	s registered agent,	
Such change was authorized by the	authorized by resolution duly adopted board, or the corporation has been not	by its board of directors or by an ified in writing of the change.	officer so	
14		heather nixon president		
I hereby accept t I further agree to performance of n agent. Or, if this	he appointment as registered agent and ocomply with the provisions of all statu ny duties, and I am familiar with and ac document is being filed merely to refle hat the corporation has been notified in	tes relative to the proper and con cept the obligation of my position ct a change in the registered offic	iplete -0	
Nu	2	07/18/2014	ं ज	
Signa	ature of Registered Agent	Date		
If signing on beh	alf of an entity:			
Тут	ped or Printed Name			

\* \* \* FILING FEE: \$35.00 \* \* \*

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

## SUBJECT: NIXONS HOME INSPECTION INC

Name of Corporation

DOCUMENT NUMBER: p12000023749

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:

## Heather nixon

Name of Contact Person

## nixons home inspection inc

Firm/Company

#### 3660 coco lake drive

Address

## coconut creek, fl 33073

City/State and Zip Code

# nixonacn@yahoo.com

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

For further information concerning this matter, please call:

### heather nixon

,954

304-2123

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