## P12000069568

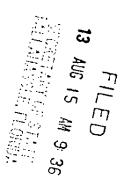
(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Wilbert Pain	ne of Corporation	
DOCUMENT NUMBER: P1200069568		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this	s matter to the following:	
	t Hernandez of Contact Person  H Painting Inc	
5897	42nd Aven	
St. F. City/S	eters burg, FL 33709 State and Zip Code	
E-mail address: (to be use	d for future annual report notification)	
For further information concerning this matter, please call:		
Guilberto Hernandez Name of Contact Person	at (727) 235 5970  Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Amendment Section Division of Corporati P.O. Box 6327	Street Address: Amendment Section ons Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



August 6, 2013

GUILBERT HERNANDEZ 5897 42ND AVE N ST PETERSBURG, FL 33709

SUBJECT: WILBERT PAINTING, INC.

Ref. Number: P12000069568

We have received your document for WILBERT PAINTING, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

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.

Letter Number: 313A00018804

Carol Mustain Regulatory Specialist II

www.sunbiz.org

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (03/12)