

712000095354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

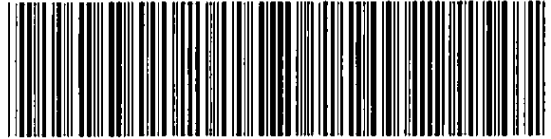
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JESSIE, FL
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R. HUNT

02/14/24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TC&AP Incorporated
Name of Corporation

DOCUMENT NUMBER: P12000095354

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:

Brent Buscay

Name of Contact Person

Laughlin Associates Inc

Firm/Company

680 W Nye Lane Ste 202

Address

Carson City, NV 89703

City/State and Zip Code

beth@twochicksandapot.com

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

CLERK OF STATE
TALLAHASSEE, FL

514 PM 12:30

CL

For further information concerning this matter, please call:

Brent Buscay

at (775) 883-8484

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: TC&AP Incorporated
2. The principal office address: 550 Gus Hipp Blvd 5, Rockledge, FL 32955
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/16/2012 Document number: P12000095354
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)

HAZLEY, BETH E

2761 Manitoba Way

ROCKLEDGE, FL 32955

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

NRAI Services, Inc.

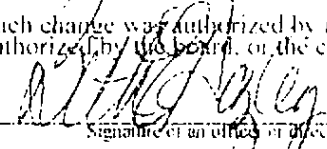
1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, FL 33324

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.

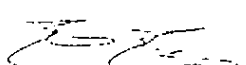


Signature of an officer or director

Beth E Hazley, President

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

02/07/2024

Date

If signing on behalf of an entity

Brent Buscay, Assistant Secretary

Typed or Printed Name

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

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

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2024 FEB 14 PM 12:30
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

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