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(Requestor's Name)
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C. LEWIS OCT 2 4 2013 **EXAMINER**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 14, 2013

KIMBERLY COVERT / CBI OF SOUTH FLORIDA INC PO BOX 1958 FORT MILL, SC 29716

SUBJECT: CBI OF SOUTH FLORIDA, INC.

Ref. Number: P13000040771

We have received your document for CBI OF SOUTH FLORIDA, 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.

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: 013A00023994

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corporations
SUBJECT: CBT of South Florida, Inc. Name of Corporation
DOCUMENT NUMBER: P13000040771
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:
Mimberly Covert Name of Contact Person
CBI of South Florida, Inc.
P.O. Box 1958 Address
Fort Mill, SC 29716 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (704) 458-8676 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

TO:

Amendment Section

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: CBI of South Florida, Inc. 2. The principal office address: 4020 Yancey Pol. Charlotte, NC 28217
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 5/6/2013 Document number: P13000040771
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)
NHAI Services, Inc.
1200 South Rine Island Rd.
Plantation, FL 33324 Ex =
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Dan Buch weitt CBT of South Florida, Inc. 337 East Las Olas Blvd. P.O. Box NOT acceptable Ft. Lauderdale, FL 33301
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.
Usignature of an officer or director Kinherty Covert 5 VP 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. 10-2-13 Signature of Registered Agent
If signing on behalf of an entity:
Kimbert Creat Typed or Printed Name

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