P13000068788

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C. LEWIS

MAY 13 2014

EXAPPINER

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Cory A Boff Inc.	
Name of Cor	•
DOCUMENT NUMBER: P13000068788	<u> </u>
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	to the following:
Cory A Boff	
Name of Cont.	act Person
Cory A Boff Inc.	
Firm/Con	ipany
3649 Bahia Vista S	t
Addre	SS
Sarasota, FL 3423	2
City/State and	Zip Code
insurecory@hotmai	l.com
E-mail address: (to be used for fut	ure annual report notification)
For further information concerning this matter, please ca	di:
Cory A Boff	at (941)9610505 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departn	nent of State.
, ,	
Mailing Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

CR2E045 (03/12)

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: Cory A Boff Inc	
2. The principal office address: 3649 Bahia Vista St. Sarasota FL 34232	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 08/19/2013 Document number: P13000068788	
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)	
CORPORATION SERVICE COMPANY	
1201 HAYS STREET	
TALLAHASSEE, FL 32301	
TALLAHASSEE, FL 32301 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
	远 实
3649 Bahia Vista St	: 23
P.O. Box NOT acceptable	
Sarasota FL 34232	
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 expector Cony A Boff President	
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.	
- Jun all 4/28/14	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Lông A Bo F F	
* * * FILING FEF: \$35.00 * * *	

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)