

P130000 76947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

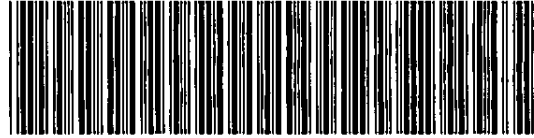
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUL 18 P 1:14

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JUL 25 2016

T. LEMUEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: APOLLO PACKAGING Inc
Name of Corporation

DOCUMENT NUMBER: P13000076947

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:

Kenneth Persch
Name of Contact Person

Apollo Packaging, Inc
Firm/Company

3098 Prescott Falls Dr
Address

Jacksonville FL 32224
City/State and Zip Code

Perschl@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth Persch at (904) 237-2097
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

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: APOLLO PACKAGING, Inc
2. The principal office address: 3001 Faye Road, Jacksonville FL 32226
moved from 11200 St Johns Industrial Pkwy N #8 Jax FL 32226
3. The mailing address (if different): 3098 Prescott Falls Dr
Jacksonville FL 32224
4. Date of incorporation/qualification: _____ Document number: _____
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)

LINDA Petsch

3098 Prescott Falls Dr

Jacksonville FL 32224

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

Kenneth Petsch

3098 Prescott Falls Dr

P.O. Box NOT acceptable

Jacksonville FL 32224

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.

Kenneth T. Petsch
Signature of an officer or director

Kenneth T. Petsch, Pres.
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.

Kenneth T. Petsch
Signature of Registered Agent

7-12-16
Date

If signing on behalf of an entity:

Kenneth T. Petsch
Typed or Printed Name

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

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

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA