

P13000091983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2016 NOV 21 AM 11:38

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C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Atlantic Petroleum Equipment, INC.
Name of Corporation

DOCUMENT NUMBER: P13000091983

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:

JAMES Angelone
Name of Contact Person

Atlantic Petroleum Equipment
Firm/Company

227 SW 32nd St.
Address

Fl. Land Fl. 33315
City/State and Zip Code

atlanticpetroleumequipment@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES Angelone at (954) 729-0351
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



James Angelone <atlanticpetroleumequipment@gmail.com>

Information Change on My SunBiz Account

2 messages

James Angelone <atlanticpetroleumequipment@gmail.com>
To: corpaddresschange@dos.myflorida.com

Wed, Nov 16, 2016 at 10:53 AM

Hi,
I would like to update some information on my SunBiz account. Here are my change requests.
Thanks,
James Angelone
Atlantic Petroleum Equipment
Document #P13000091983
FEI/EIN #46-4101179

* Please change the SunBiz information to reflect the changes below:

* Address Change for Principal & Mailing Addresses:

227 SW 32nd Street
Fort Lauderdale, Fl. 33315

* Registered Agent Name & Address Change:

Angelone, James D
227 SW 32nd Street
Fort Lauderdale, Fl. 33315

* Officer/Director Detail Change:
(Please take off Victoria Angelone off as an Officer (S & T)

Title: P, S, & T

Angelone, James D
227 SW 32nd Street
Fort Lauderdale, Fl. 33315

CorpAddressChange <corpaddresschange@dos.myflorida.com>
To: James Angelone <atlanticpetroleumequipment@gmail.com>

Wed, Nov 16, 2016 at 11:08 AM

We have processed your request, with the exception of the Registered Agent's Address, which cannot be changed via email.

This address change requires a form and fee of \$35.00, below is a link to the forms and instructions and if you have questions, please contact the Amendment Section at 850-245-6050.

**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: ATLANTIC Petrochemical Equipment, INC.
2. The principal office address: 227 SW 32nd ST.
Ft. Lauderdale, FL. 33315
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/12/13 Document number: P13000091983

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)

ANGELONG, JAMES
441 SURFSIDE LANE
Juno Beach, FL. 33408

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

ANGELONG, JAMES
227 SW 32 ST
P.O. Box NOT acceptable
FT LAUDERDALE FL 33315

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DIVISION OF CORPORATIONS
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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]
Signature of an officer or director

JAMES ANGELONG
Printed or typed name and title

Whereby 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]
Signature of Registered Agent

11-16-16
Date

If signing on behalf of an entity:

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
CR2E045 (03/12)