

P13000094937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TO: Amendment Section
Division of Corporations

SUBJECT: My Bondsman Bail Bonds Inc
Name of Corporation

DOCUMENT NUMBER: P13000094937

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:

Arthus Alcin
Name of Contact Person

My Bondsman Bail Bonds Inc
Firm/Company

1279 King Street
Address

CoCoa, Florida 32922
City/State and Zip Code

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

For further information concerning this matter, please call:

Arthus Alcin at (561) 537-1147
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: My Bondsman Bail Bonds Inc
2. The principal office address: 416 S. Military trail
West Palm Beach, FL 33415
3. The mailing address (if different): 6901 Okeechobee Blvd
D5-F10 West Palm Beach, FL 33411
4. Date of incorporation/qualification: 11/22/13 Document number: P13000094937
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)

Arthur Alcin
416 S. Military trail
West Palm Beach, FL 33415

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

Arthur Alcin
1279 King Street
Coloa, FL 32922

P.O. Box NOT acceptable

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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.

Arthur Alcin
Signature of an officer or director

Arthur Alcin 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.

Arthur Alcin
Signature of Registered Agent

11-7-14
Date

If signing on behalf of an entity:

Typed or Printed Name

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