

P14000053536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000290632030

09/30/16--01020--011 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE
2016 SEP 30 AM 9:14

OCT - 7 2016

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AAP Business Enterprises Inc.
Name of Corporation

DOCUMENT NUMBER: P14 0000 53536

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:

Coleman Alan Petrie
Name of Contact Person

AAP Business Enterprises Inc
Firm/Company

55 West Church Street, Apt. 2918
Address

Orlando, FL 32801
City/State and Zip Code

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

For further information concerning this matter, please call:

Elizabeth Alison Petrie at (321) 277-7128
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AAP Business Enterprises Inc
2. The principal office address: 1272 Grady Lane
Champions Gate FL 33896
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 6/18/2014 Document number: P14000053536

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)

Coleman Alan Petrie
1272 Grady Lane
Champions Gate FL 33896

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

Coleman Alan Petrie
55 West Church Street, Apt 2918
Orlando FL 32801

P.O. Box NOT acceptable

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.

Elizabeth Alison Petrie
Signature of an officer or director

ELIZABETH ALISON PETRIE
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.

Coleman Alan Petrie
Signature of Registered Agent

9/26/16
Date

If signing on behalf of an entity:

Typed or Printed Name

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

2016 SEP 30 AM 9:14
DIVISION OF CORPORATIONS
STATE OF FLORIDA