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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. LEMIEUX

MAR 25 2015

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Group Fit PCB.Com
Name of Corporation

DOCUMENT NUMBER: P14000053669

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:

Joni Johns

Name of Contact Person

Group Fit

Firm/Company

312 Hidden Island Dr

Address

Panama City Beach, FL 32408

City/State and Zip Code

bchrental@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joni Johns

Name of Contact Person

at (850) 832-4088

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 10, 2015

JONI JOHNS
312 HIDDEN ISLAND DR
PANAMA CITY BEACH, FL 32408

SUBJECT: GROUP FIT PCB.COM, INC.
Ref. Number: P14000053669

We have received your document for GROUP FIT PCB.COM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 615A00004869

15 MAR 19 AM 11:00

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: Group Fit Pcb.Com
2. The principal office address: 8317 Front Beach Rd Suite 28
Panama City Beach, FL 32407
3. The mailing address (if different): 312 Hidden Island Dr
Panama City Beach, FL 32408
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)
The Company Corporation
2711 Centerville Rd, Suite 400
Wilmington, DE 19808

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

Joni Johns

312 Hidden Island Dr

P.O. Box NOT acceptable

Panama City Beach, FL 32408

15 MAR 19 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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.

Joni Johns
Signature of an officer or director

Joni Johns

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.

Joni Johns
Signature of Registered Agent

3-16-78
Date

If signing on behalf of an entity:

Joni M. Johns
Typed or Printed Name

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