

P140000084051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

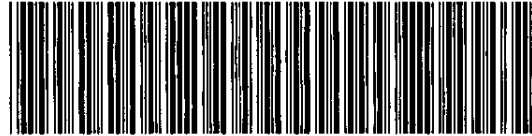
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800273312998

05/29/15--01007--012 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2015 MAY 29 AM 9:58

Rolch8
@ 6/5/15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Augustine Financial, Inc.
Name of Corporation

DOCUMENT NUMBER: P14000084051

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:

Jonathan L. Hurst
Name of Contact Person

Augustine Financial, Inc.
Firm/Company

6680 Madison St. Unit A
Address

St. Augustine, FL 32080
City/State and Zip Code

Jhurst.trader88@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonathan L. Hurst at (386) 446-9999
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Augustine Financial, Inc.
2. The principal office address: 6680 Madison St, Unit A, St. Augustine,
FL 32080
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 10/11/2014 Document number: P14000084051
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)

Jonathan L. Hurst, President & CEO
12 Crabtree Ct,
Palm Coast, FL 32137

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

Jonathan L. Hurst
6680 Madison St, Unit A
P.O. Box NOT acceptable
St. Augustine, FL 32080

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.

Carol L. Stone
Signature of an officer or director

Carol L. Stone - VP Secretary
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.

Jonathan Hurst
Signature of Registered Agent

5/21/2015
Date

If signing on behalf of an entity:

Jonathan Hurst
Typed or Printed Name

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2015 MAY 29 AM 9:50