

P15000013164

(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:

nework blank, no sign

Office Use Only



300282940793

03/07/16--01034--019 **35.00

✓

RACG

MAR 22 2016

R. WHITE

FILED
16 MAR 21 PM 5:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Carolyn Moriarty & Company, Inc.
Name of Corporation

DOCUMENT NUMBER: 101

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:

Carolyn Moriarty

Name of Contact Person

Carolyn Moriarty & Company, Inc.

Firm/Company

311 Maitland Ave.

Address

Altamonte Springs, FL 32701

City/State and Zip Code

carolyn@carolynmoriarty.com

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

For further information concerning this matter, please call:

Carolyn Moriarty

Name of Contact Person

at (407) 252-5457

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 11, 2016

CAROLYN MORIARTY
311 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 32701 US

SUBJECT: CAROLYN MORIARTY & COMPANY, INC.
Ref. Number: P15000013164

We have received your document for CAROLYN MORIARTY & COMPANY, 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):

Section 6 must be completed with the name and street address of the new registered agent(if changed) or the registered office(if changed). Section 6 cannot be left blank.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 716A00005123

RECEIVED
16 MAR 21 PM 1:09
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: Carolyn Moriarty & Company, Inc.
2. The principal office address: 311 Maitland Ave.
Altamonte Springs, FL 32701
3. The mailing address (if different): 311 Maitland Ave.
Altamonte Springs, FL 32701
4. Date of incorporation/qualification: 02/09/15 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)

Carolyn Moriarty

2097 Wembley Pl

Oviedo, FL 32765

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

Carolyn Moriarty

311 Maitland Ave.

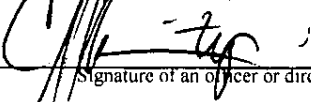
P.O. Box NOT acceptable

Altamonte Springs, FL 32701

FILED
16 MAR 21 PM 5:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

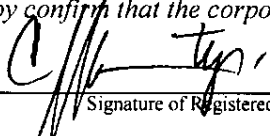
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Carolyn Moriarty, Owner / Broker

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.


Signature of Registered Agent

3/3/16

Date

If signing on behalf of an entity:

Typed or Printed Name

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