

P150000 83007

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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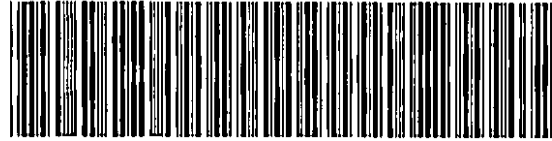
(Business Entity Name)

(Document Number)

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CIVIL DIVISION

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JAN 22 2019
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SPRING PINES MANAGEMENT, INC
Name of Corporation

DOCUMENT NUMBER: P15 0000 83007

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:

ERIC B. PEARCE
Name of Contact Person

SPRING PINES MANAGEMENT, INC
Firm/Company

1301 1ST ST S APT 1603
Address

JACKSONVILLE BEACH, FL 32250
City/State and Zip Code

HANDILITE55 @ gmail. com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ERIC B. PEARCE at (404) 234 8638
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: SPRING PINES MANAGEMENT, INC
2. The principal office address: 1301 1ST ST S APT 1603
JACKSONVILLE BEACH, FL 32250
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 10-2-2015 Document number: P 15 0000 83007
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)

WILLIAM E. DOYLE
2121 CORPORATE SQUARE BLD Suite 120
JACKSONVILLE, FL 32216

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

(PEARCE)
ERIC B. PEARCE
1301 1ST ST S APT 1603
P.O. Box NOT acceptable
JACKSONVILLE BEACH, FL 32250

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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.

Eric Pearce
Signature of an officer or director

Eric B Pearce 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.

Eric Pearce
Signature of Registered Agent

January 8, 2019
Date

If signing on behalf of an entity:

Eric B. Pearce
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314