

P17000042841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

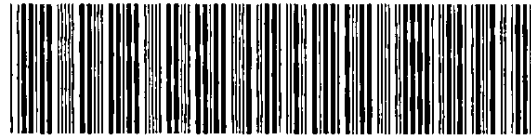
(Business Entity Name)

(Document Number)

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FILED  
2017 JUN 16 AM 11:38  
Clerk of Court  
San Francisco, CA

C. GOLDEN

JUN 20 2017

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** A NE Time Moving, Inc

Name of Corporation

**DOCUMENT NUMBER:** P17000042841

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:

Austin Robbins

Name of Contact Person

A NE Time Moving, Inc

Firm/Company

1251 Thomsaville Circle

Address

Lakeland, FL 33811

City/State and Zip Code

austin.robbins1996@gmail.com

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

For further information concerning this matter, please call:

Austin Robbins

Name of Contact Person

at ( 863 ) 604-9784

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: A NE Time Moving, Inc
2. The principal office address: 1251 Thomasville Circle  
Lakeland, FL 33811
3. The mailing address (if different): same
4. Date of incorporation/qualification: 05/11/2017 Document number: P17000042841
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)

Shannon, James  
2115 Gachet Blvd  
Lakeland, FL 33813

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

Austin Robbins  
1251 Thomasville Circle  
P.O. Box NOT acceptable  
Lakeland, FL 33811

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.

*Austin Robbins*  
Signature of an officer or director

Austin Robbins, 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.*

*Austin Robbins*  
Signature of Registered Agent

06/07/2017

Date

If signing on behalf of an entity:

Austin Robbins

Typed or Printed Name

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