

P170000 98683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

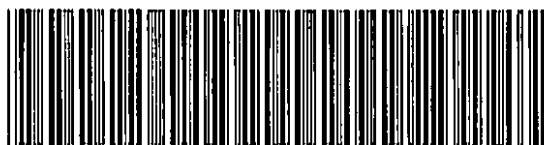
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/18/20--01015--024 **25.00

04/23/20--01001--028 **10.00

2020 APR 22 PM 3:28

FILED

RA/RO/chg

APR 28 2020
ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ACS Subs Inc
Name of Corporation

DOCUMENT NUMBER: P17000098683

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:

Daniel Steppling
Name of Contact Person

ACS Subs Inc
Firm/Company

1021 SW Pine Tree Ln
Address

Palm City, FL 34990
City/State and Zip Code

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

For further information concerning this matter, please call:

Daniel Steppling at (772) 233-5244
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 1, 2020

DANIEL STEPPLING
1066 DAKOTA DR
APT. 101
JUPITER, FL 33458

SUBJECT: ACS SUBS, INC
Ref. Number: P17000098683

We have received your document for ACS SUBS, INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 520A00007067

REC'D
2020 APR 22 PM 2:55

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ACS Subs Inc
2. The principal office address: 1021 SW Pine Tree Ln, Palm Cty, FL 34990

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/14/2017 Document number: 01700098683

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)

Legal Corps Solutions LLC
3340 W Hollywood Blvd, Suite 415
Hollywood, FL 33020

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

Daniel Steppling
1021 SW Pine Tree Ln
Palm Cty, FL 34990
P.O. Box NOT acceptable

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]
Signature of an officer or director

Daniel Steppling, 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.

[Signature]
Signature of Registered Agent

4/20/2026
Date

If signing on behalf of an entity:

Daniel Steppling
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
CR2E045 (04/13)

2020 APR 22 PM 3:28

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