

P1900000 3387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

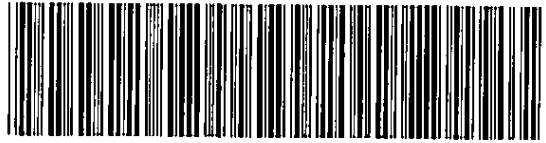
(Business Entity Name)

(Document Number)

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2020 APR 10 AM 8:37

SECRETARY OF STATE  
TALLAHASSEE, FL

APR 23 2020  
C Kinsey

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: WAYNE ATKINSON INC  
Name of Corporation

DOCUMENT NUMBER: P19000003387

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:

BELINDA ATKINSON  
Name of Contact Person

WAYNE ATKINSON INC  
Firm/Company

135 SEKINS ST, STE 105B-304  
Address

St. Augustine, FL 32086  
City/State and Zip Code

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

For further information concerning this matter, please call:

BELINDA ATKINSON at (904) 417-3554  
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

**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: WAYNE ATKINSON INC
2. The principal office address: 135 SENKINS STREET, 105B-304  
ST. AUGUSTINE, FL 32084
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 1/08/2019 Document number: P19000003387
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)

HALL FINANCIAL CORPORATION  
3791 AIA South, Suite B  
ST AUGUSTINE, FL 32080

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TALLAHASSEE, FL

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

BELINDA V. ATKINSON  
135 SENKINS STREET, STE 105B-304  
ST AUGUSTINE, FL 32086

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

NORMAN W. ATKINSON  
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

4/1/2020  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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)