

P21 0000014682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

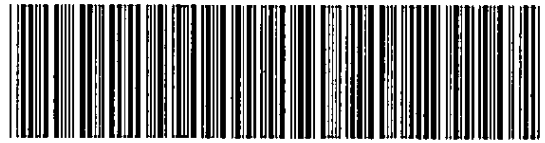
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Change of address of Designated Agent
Name of Corporation _____

DOCUMENT NUMBER: P21000014682

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:

Lou Christian

Name of Contact Person

Cornerstone Home Inspections of NW FL, Inc

Firm/Company

410 Locksley Drive

Address

Panama City Beach, FL 32413

City/State and Zip Code

inspector@cshomeinsp.com

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

For further information concerning this matter, please call:

Lou Christian

Name of Contact Person

at (405) 8236476

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

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.

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

SECURITY OFFICE
TALLAHASSEE, FLORIDA

2022 JUN 27 PM 4: 28

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