

P93000041342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

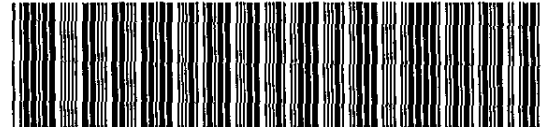
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

R.A. Change

G. Ocasio JUL 19 2004

W. RODGERS MOORE, P.A.

ATTORNEY AT LAW

ONE LINCOLN PLACE
1900 GLADES ROAD,
SUITE 401
BOCA RATON, FLORIDA 33431

MAILING ADDRESS:
P.O. BOX 7073
BOCA RATON, FLORIDA 33431

PHONE
(561) 394-7910
FAX
(561) 393-6541
DIRECT DIAL
(561) 394-7944
EMAIL
wrmoorelaw@aol.com

July 1, 2004

Mr. Eugene W. Kligmann
Commercial Pay Phones, LLC
8510 N.W. 56th Street
Miami, FL 33166

RE: COMMERCIAL PAY PHONES, INC.

Dear Gene:

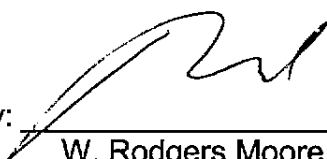
Enclosed are a Transmittal Letter and a Form for Change of Address for Registered Agent of a Corporation for the above referenced company.

Please sign where indicated, send a copy to us for your records, and forward to the Department of State in the postage prepaid envelope provided.

Please do not hesitate to call me if you have any questions.

Very truly yours,

W. RODGERS MOORE, P.A.

By: 

W. Rodgers Moore, Esq.

WRM:mga
Enclosures

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COMMERCIAL PAY PHONES, INC.
(Name of corporation)

DOCUMENT NUMBER: P93000041342

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:

W. RODGERS MOORE, ESQ.
(Name of person)

W. RODGERS MOORE, P.A.
(Name of firm/company)

1900 GLADES ROAD, SUITE 401
(Address)

BOCA RATON, FL 33431
(City/state and zip code)

For further information concerning this matter, please call:

W. RODGERS MOORE, ESQ. at (561) 394-7944
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

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: COMMERCIAL PAY PHONES, INC.
2. The principal office address: 8510 N.W. 56TH STREET
MIAMI, FL 33166
3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 1996 Document number: P93000041342

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

W. R. MOORE

4800 NORTH FEDERAL HIGHWAY, SUITE 210-A

BOCA RATON, FL 33431

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

W, RODGERS MOORE, P.A.

1900 GLADES ROAD, SUITE 401

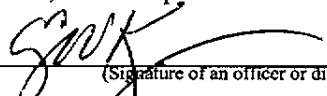
(P.O. Box or personal mailbox NOT acceptable)

BOCA RATON, FL 33431

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04 JUL -9 AM 8:01
SECRETARY OF STATE
TALLAHASSEE, FL 32314

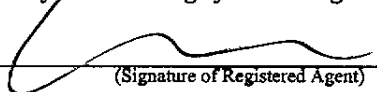
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director)

EUGENE W. KLIGMANN, DIRECTOR
(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 of Registered Agent)

7/1/09
(Date)

If signing on behalf of an entity:

W. RODGERS MOORE
(Typed or Printed Name)

PRESIDENT
(Capacity)

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

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