

P95000023377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

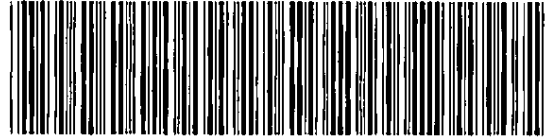
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



800429180138

05/07/24 - 01010 - 013 **35.00

2024 JUN -7 AM 9:27

Law Offices
JAMES E. BEDSOLE, LLC
2450 Old Moultrie Road, Suite 104
St. Augustine, Florida 32086
(904) 797-8701
service@bedsolelaw.com

May 3, 2024

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: K-TILE, INC., a Florida for-profit corporation
Doc. No. P95000023377

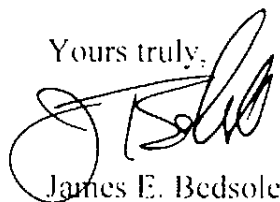
Dear Sirs:

In regard to the above-referenced Florida corporation, please find attached the following:

1. Cover letter;
2. Statement of Change of Registered Agent;
3. Check in the amount of \$35.00 payable to the Department of State.

We present these on behalf of our client, K-Tile, Inc. If you have any questions or need further information, please contact either the undersigned, at the above address, or the new registered agent.

Yours truly,



James E. Bedsole

JEB/rbg
Enclosures

cc: David P. Hays
cc: Keith P. Hays

wk/rg/relest/let-div.corp.5-3-24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: K-TILE, INC.
Name of Corporation

DOCUMENT NUMBER: P95000023377

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:

DAVID P. HAYS

Name of Contact Person

K-TILE, INC.

Firm/Company

3175 US 1 SOUTH, NO. 8

Address

ST. AUGUSTINE, FL 32086

City/State and Zip Code

STIX937@GMAIL.COM

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

For further information concerning this matter, please call:

DAVID P. HAYS

Name of Contact Person

at (904)

325-2230

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: K-TILE, INC.
2. The principal office address: 3175 U.S.1 South, No. 8
St. Augustine, FL 32086
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/22/1995 Document number: P95000023377
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)

KEITH P. HAYS

3175 U.S.1 South, No. 8

St. Augustine, FL 32086

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

DAVID P. HAYS

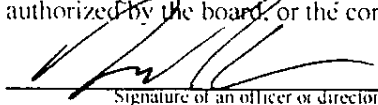
3175 U.S.1 South, No. 8

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 of an officer or director

DAVID P. HAYS, PD

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.

X 
Signature of Registered Agent

5/2/2024

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)

2024 MAY -7 AM 9:27