

P95 000090668

Requestor's Name
Address
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-03/27/97--01044--006
*****70.00 *****35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAR 27 AM 10:57

MILAM OTERO LARSEN
DAWSON & TRAYLOR, P.A.

Ann M. Meadows

Writer's Direct Line:
904/398-5514, ext. 108

March 24, 1997

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**RE: Poulan/Weed Eater Consumer Service Organization, Inc.
Southeast Equipment Distributing Co.**

Dear Sir/Madam:

Please find enclosed two Statement of Change of Registered Office or Registered Agent forms for the above-referenced corporations. Also enclosed is a check in the amount of \$70.00 (\$35.00 each) for the filing fee.

Sincerely,



W. Hamilton Traylor

AMMfs

Enclosure

meadowsa\corp\main\org\L-SOSchg RA

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*****70.00 *****35.00

**STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of Sections 607.0501 and 607.0502, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

- 1a. The name of the corporation is: Poulan/Weed Eater Consumer Service Organization, Inc.
- 1b. The mailing address of the corporation is: 300 Technology Park
Lake Mary, FL 32746
- 1c. Date of incorporation: 11/29/95 Document number: P95000090668
2. The name and address of the current registered agent and office:

RAX CO., a Florida corporation
c/o Mahoney Adams & Criser, P.A.
50 N. Laura Street, 3400 Barnett Center
Jacksonville, FL 32202

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

MOTOLAW, Inc., a Florida corporation
c/o Milam Otero Larsen Dawson & Traylor, P.A.
1301 Riverplace Boulevard, Suite 1301
Jacksonville, FL 32207

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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.

J. F. Alvarez
(Signature of an officer, chairman
or vice chairman of the board)

Dated: 3/19/97

J. F. Alvarez, Vice President
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

MOTOLAW, Inc., a Florida corporation

By: W. Hamilton Traylor
W. Hamilton Traylor, Vice President

Dated: 3/25/97