

P96000000 9750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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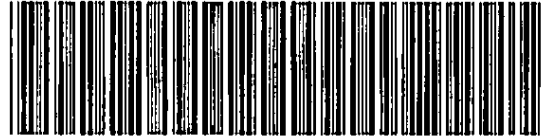
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

2/1/2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Marchand Faries Financial Management, Inc.
Name of Corporation

DOCUMENT NUMBER: P06000009750

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:

Stephen T Faries

Name of Contact Person

Marchand Faries Financial Management, Inc.

Firm/Company

PO Box 2179

Address

Keystone Heights, FL 32656-8725

City/State and Zip Code

steve@mffm.com

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

For further information concerning this matter, please call:

Stephen T Faries

Name of Contact Person

at (

904

) 662-6563

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: Marchand Faries Financial Management, Inc.
2. The principal office address: 229 W Norfolk Road, Jupiter, FL 33469
3. The mailing address (if different): PO Box 2179, Keystone Heights, FL 32656-8725
4. Date of incorporation/qualification: 01/29/1996 Document number: P96000009750
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)

Stephen T Faries - Resigned

8047 Odom Ranch Trail

Keystone Heights, FL 32656-8725

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

Jennifer C. Sheffler

229 W Norfolk Road

P.O. Box NOT acceptable

Jupiter, FL 33469

SECRETARY OF STATE
TALLAHASSEE, FL

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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, or the corporation has been notified in writing of the change.

Stephen T. Faries
Signature of an officer or director

Stephen T. Faries

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.*

J. Sheffler
Signature of Registered Agent

10/28/22

Date

If signing on behalf of an entity:

Jennifer Sheffler

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)