

P96000039022

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ONIX ARCHITECTURE CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: P96000039022

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:

BRIAN D. WOLFE
(Name of Contact Person)

BRIAN D. WOLFE ARCHITECT INC.
(Firm/Company)

5005 PILKETT COURT
(Address)

TAMPA FL 33624
(City/State and Zip Code)

For further information concerning this matter, please call:

Judy Wolfe at (813) 417 4088
(Name of Contact 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2006

BRIAN D. WOLFE
BRIAN D. WOLFE ARCHITECT INC.
5005 PICKETT CT.
TAMPA, FL 33624

SUBJECT: ONICX ARCHITECTURE, CORPORATION
Ref. Number: P96000039022

We have received your document for ONICX ARCHITECTURE, CORPORATION and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can not change the corporation name on the form you submitted. Please see the enclosed Articles of Amendment form. You can change the corporation name and make any other changes to the corporation. Please contact me at the number listed below if there are any questions regarding the filing of the enclosed form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum
Document Specialist

Letter Number: 006A00045836



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 7, 2006

BRIAN D. WOLFE
BRIAN D. WOLFE ARCHITECT INC.
5005 PICKETT CT.
TAMPA, FL 33624

SUBJECT: ONICX ARCHITECTURE, CORPORATION
Ref. Number: P96000039022

We have received your document for ONICX ARCHITECTURE, CORPORATION and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

A corporation can not be listed as there own registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum
Document Specialist

Letter Number: 606A00044002

**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: BRIAN D. WOLFE Architect INC.
2. The principal office address: 15438 N. FLORIDA AVE, SUITE 140
TAMPA, FL 33613
3. The mailing address (if different): 5005 Pickett CT
TAMPA FL 33624
4. Date of incorporation/qualification: 3/6/2000 Document number: P96000039022
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

BRIAN D. WOLFE
5005 Pickett CT
TAMPA FL 33624

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

N/A
(P.O. Box NOT acceptable)

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JUL 25 AM 8:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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) BRIAN D. WOLFE President
(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] 7/14/06
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

BRIAN D. WOLFE
(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 (8/05)