P96000044350

000002867090 ****280.00 *****35.00 546 1st Street · Vero Beach, FL 32962 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ☐ Walk in Pick up time Certificate of Status Mail out Photocopy Will wait AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger

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Name Reservation

REGISTRATION/QUALIFICATION
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 Reinstatement
Trademark
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Examiner's Initials

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

•	ons of sections 607.0502			, Florida Statutes,
the undersigned corpora	ition organized under the	laws of the Si	ate of Florida	
submits the following sta	atement in order to chan	ge its register	ed office or registered	agent, or both, in
the State of Florida.				
1. The name of the corpo	oration is: The G.K.	. Fisher (Company of Ft.	Myers, Inc.
2. The mailing address of	of the corporation is: 54	6 First S	treet, Vero Bea	ach,
	<u>F1</u>	orida 32	962	· · · · · · · · · · · · · · · · · · ·
3. Date of incorporation	n/qualification: 5/20/	/96	Document number:	P96000044350
4. The name and address	s of the current registered	agent and off	ice:	
Ro	obert Toomey			₹s
54	46 First Street		· · · · · · · · · · · · · · · · · · ·	199
-		•		
	ero Beach, Florid s of the new registered ag			ptable)
	onna Prieto			
54	46 First Street			
<u>V</u> e	ero Beach, Florid	la 32962		≯
The street address of its agent, as changed, will	s registered office and the be identical.	e street addres	ss of the business offic	ce of its registered
	orized by resolution duly			
AL.	7 bruio		2/5	199
	cer, chairman or vice chairman of	f the board)	(Da	ite)
Presi	dent 4 CEO		The state of the s	
(Pri	nted or typed name and title)	accept service	e of process for the ab	ove stated
регјогтапсе ој ту аш	registered agent and to accept the appointment a ply with the provisions of ies, and I am familiar wi	s registerea a fall statutes r ith and accept	gent and agree to act elative to the proper a the obligation of my p	nd complete position as
registered agent	a.M. Guet	Ś	1-31-	99
	of Registered Agent)		(Date)	
If signing on behalf of an en	ntity:			
n/a	-		n/a	
(Typed or	Printed Name)	To an indicate of the state of	(Capacity)	ay y the contract of the contr

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

711 B.J. 11 #2