

P96000003653

(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



100241166411

11/05/12--01039--012 **35.00

FILED
12 NOV -6 PM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Signature]

NOV 07 2012

T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NC IV inc
Name of Corporation

DOCUMENT NUMBER: 14 175 4992

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:

Mary A. Price
Name of Contact Person

NC IV inc
Firm/Company

1788 Barber Rd
Address

Sarasota FL 34240
City/State and Zip Code

mprice@nctwo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Price - president at (941) 378 9133
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

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 FL,
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NC IR Inc
2. The principal office address: 1788 Barber Rd
Sarasota FL 34240
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1998 Document number: P 96 000063653

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)

Robert R Price - Vice President
10687 Fruitville Rd
Sarasota FL 34240

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

Mary A Price President
10687 Fruitville Rd
Sarasota FL 34240

P.O. Box NOT acceptable

FILED
12 NOV -5 PM 9:02
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.

Robert R Price
Signature of an officer or director

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.

Mary A Price - President 10-31-12
Signature of Registered Agent Date

If signing on behalf of an entity:

Typed or Printed Name

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