# P97000031266

(Requestor's Name)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
. (Business Entity Name)
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(Document Number)
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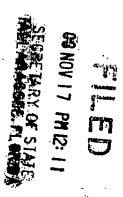
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11/06/08--01012--001 \*\*25.00

11/21/08--01006--021 \*\*10.00



R.A. Charge

**C.COULLIETTE** 

NOV 212008

**EXAMINER** 

# THE HOGAN LAW FIRM®

October 27, 2008

**Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

Subject: Freeway Repair, Inc. Ref. Number: P97000031266

To Whom It May Concern:

1 wI hereby am familiar with and except the duties and responsibilities as registered agent for said corporation.

Please except this letter as written acceptance of Registered Agent.

Should you have any further questions, please contact my Assistant, Kimberly at 352-799-8423.

Sincerely,

Lebencer Hagan, Esq. Ro

DH/ko Enclosure(s)

#### **COVER LETTER**

Division of Corporations
SUBJECT: FREEWAY REPAR, INC. (Name of Corporation)
DOCUMENT NUMBER: P97 0000 31266
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:
KIMBERLY D'NEILL (Name of Contact Person)
(Name of Contact Person)
THE HOGAN LAW FIRM
(Firm/Company)
20 SOUTH BROAD STREET (Address)
BROOKSVILLE FLORIDA 34601 (City/State and Zip Code)
For further information concerning this matter, please call:
Deborah Hogan, ESq at (352) 799-8423 (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

TO:

Amendment Section



### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 12, 2008

KIMBERLY O'NEILL THE HOGAN LAW FIRM 20 SOUTH BROAD ST BROOKSVILLE, FL 34601

SUBJECT: FREEWAY REPAIR, INC.

Ref. Number: P97000031266

We have received your document for FREEWAY REPAIR, INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 608A00056919





## 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: FREEWAY REPAIR, INC.	
2. The principal office address: 804 SARDIS STREET	
BROOKSVILLE, FL 34601	
3. The mailing address (if different): 20 SOUTH BROAD STREET	
BROOKSVILLE, FL 34601	
4. Date of incorporation/qualification: 47/1997 Document number: P97000031266	
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)	
PREZZIE C. RUSSELL III	
804 SARDIS STREET	
Blooksville, FL 34601	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
20 SOUTH BROAD STREET	
(P.O. Box NOT acceptable)	
BROOKSVILLE FLORIDA 34601	
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 any 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.	
DIRECTOR DIRECTOR	
(Signature of an officer of 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.	
Deborah Osan Esa October 27, 2008  (Signature of Registered Agent)	
If signing on behalf of an entity:	
Deborah Hogan, Esq.	
* * * 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)