

PR8000007341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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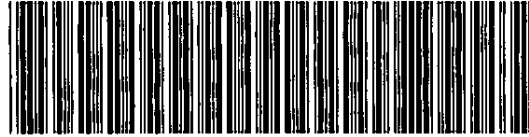
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

R/A Chg

APR 15 2016

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HARLIN SILVERS INC.
Name of Corporation

DOCUMENT NUMBER: P98000007341

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:

HARLIN R SILVERS
Name of Contact Person

HARLIN SILVERS INC.
Firm/Company
11259-1 BUSINESS PARK BLVD
~~12659-1 PLUMMER GRANT RD~~
Address

JACKSONVILLE FL 32258
City/State and Zip Code

HARLIN@JAXIT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HARLIN SILVERS at (904) 880-1811
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: HARLIN SILVERS INC.
2. The principal office address: 11259-1 BUSINESS PARK BLVD
JACKSONVILLE FL 32256
3. The mailing address (if different): P.O. Box 24472
JACKSONVILLE FL 32241
4. Date of incorporation/qualification: 1/23/98 Document number: P98000007341

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)

Brian K. Morgan
2820 CENTURY PLAZA
US-1 SOUTH STE 1
ST. AUGUSTINE FL 32086

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

HARLIN R SILVERS
11259-1 BUSINESS PARK BLVD
P.O. Box NOT acceptable
JACKSONVILLE FL 32256

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]
Signature of an officer or director

HARLIN R SILVERS, 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]
Signature of Registered Agent

4/12/16
Date

If signing on behalf of an entity:

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 (03/12)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA