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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: LPG Mechanical Contractors Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>P980006/5-233</u>
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:
(Name of Contact Person)
LPG Mechanical Contractors Inc, (Firm/Company)
20613 NW 190 AUP (Address)
High Springs, FL 326#3 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (386) 454-4683 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



March 10, 2008

CAROL L. BLUM 20613 NW 190 AVE HIGH SPRINGS, FL 32643

SUBJECT: LPG MECHANICAL CONTRACTORS, INC.

Ref. Number: P98000015233

We have received your document for LPG MECHANICAL CONTRACTORS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 008A00014644

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RECE

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

statement of change is submitted for a corporation organized under the laws of the State of <u>Florida</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: LPG mechanical Contractors Inc. 2. The principal office address: 20613 NW 190 Ave
3. The mailing address (if different):
4. Date of incorporation/qualification: Des 5,1997 Document number: P9800001523
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: All Florida Firm Inc 813 Deltona Blud Surte A Deltona, Fl 32725 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Caro C Blum 30613 Nw190 Ave (P.O. Box NOT acceptable) High Springs, Fl 32643
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. (Frunted 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 add statisties 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 of Registered Agent) (Date)
(Typed or Printed Name)

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