

P980000017745

(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



400187071964

*Registered
Address
Change*

10/29/10--01005--015 **35.00

2010 OCT 29 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

*RR
11/2/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Harwood's Miami Safe Co., Inc.
Name of Corporation

DOCUMENT NUMBER: P98000017745

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:

Craig Collins
Name of Contact Person

Harwood's Miami Safe Co., Inc.
Firm/Company

7350 SW 45th Street
Address

Miami, FL 33155
City/State and Zip Code

harwood@gate.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Craig Collins at (305) 262-6762
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 Florida
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Harwood's Miami Safe Co., Inc.
2. The principal office address: 7350 SW 45th Street, Miami, FL 33155
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/23/1998 Document number: P98000017745

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)

Craig Collins

19310 SW 288 Street

Homestead, FL 33030

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

Craig Collins

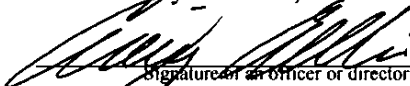
7350 SW 45th Street

P.O. Box NOT acceptable

Miami, FL 33155

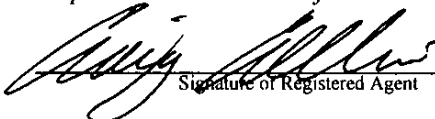
The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

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 of an officer or director

Craig Collins / 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 of Registered Agent

10/26/2010
Date

If signing on behalf of an entity:

Craig Collins

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 (8/05)

FILED
2010 OCT 29 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA