

P98000050475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TO: Amendment Section
Division of Corporations

SUBJECT: Suncrest Inc
Name of Corporation

DOCUMENT NUMBER: P98000050475

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:

Paul Marcy
Name of Contact Person

Suncrest Inc.
Firm/Company

2621 Cedar View Ct.
Address

Clearwater, FL 33761
City/State and Zip Code

Paulmarcy63@juno.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Marcy at (813) 263-4694
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: Suncrust Inc.
2. The principal office address: 2621 Cedar View Ct.
Clearwater, FL 33761
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6/5/98 Document number: P98 0000 50475
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)
Marcy, Paul
3067 Pine Street
Clearwater, FL 33763
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Paul Marcy
2621 Cedar View Ct.
P.O. Box NOT acceptable
Clearwater, FL 33761

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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.

<u>Paul Marcy</u> <small>Signature of an officer or director</small>	<u>Paul Marcy - President</u> <small>Printed or typed name and title</small>
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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.

<u>Paul Marcy</u> <small>Signature of Registered Agent</small>	<u>10/24/13</u> <small>Date</small>
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If signing on behalf of an entity:

Paul Marcy
Typed or Printed Name

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