

P98000058260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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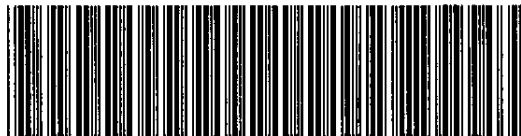
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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OCT 15 2015

I ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

SUBJECT: Ironworks, Inc., of Orange Park  
Name of Corporation

DOCUMENT NUMBER: P98000058260

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:

Kathy Vallencourt  
Name of Contact Person

Firm/Company

2729 Holly Point Road EAST  
Address

ORANGE PARK FL 32073  
City/State and Zip Code

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

For further information concerning this matter, please call:

Kathy Vallscoort at ( 904 ) 291-9330  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 2, 2015

KATHY VALLENCOURT  
2729 HOLLY POINT ROAD E  
ORANGE PARK, FL 32073

SUBJECT: IRONWORKS, INC., OF ORANGE PARK  
Ref. Number: P98000058260

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

The document is illegible and not acceptable for imaging.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 415A00020841

**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: Ironworks, Inc. of ORANGE PARK
2. The principal office address: 1701 Blanding Blvd Middleburg, FL 32068
3. The mailing address (if different): P.O. Box 65849 ORANGE PARK, FL 32073
4. Date of incorporation/qualification: 06/29/1998 Document number: P98000058260
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)

Held & Israel  
4465 Baymeadows Rd., Suite 3  
Jacksonville, FL 32217

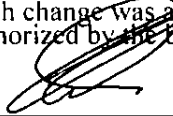
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):

Michael Vallencourt  
2729 Holly Point Road EAST  
P.O. Box NOT acceptable  
ORANGE PARK, FL 32073

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TALLAHASSEE, FLORIDA

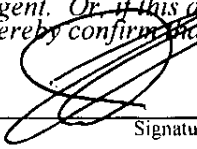
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Michael A. Vallencourt, 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

10-10-15  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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