

P 9900023665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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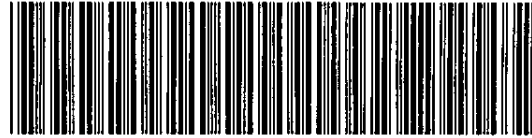
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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R. WHITE



LAW OFFICES of MARK H. RUFF, P.A.

630 North Wymore Road, Suite 330, Maitland, FL 32751
phone 407.951.6679 | fax 407.951.6678

Mark H. Ruff, Esquire
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Leslie Thomas, Esquire
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August 28, 2015

Quinton J. Sheer, Esquire
quinton@mhrlaw.com

Via First Class U.S. Mail

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

Re: Company Name: Apex Pest Control, Inc.
Document No.: P99000013665
Statement of Change of Registered Agent

Dear Sir or Madam:

Enclosed herewith for processing please find the following:

1. Cover Letter;
2. Statement of Change of Registered Office or Registered Agent or Both for Corporations – completed for the above-referenced entity; and
3. Check No. 5305 made payable to the Department of State, totaling \$35.00 to cover the filing fee for the change.

Should you have any questions or concerns regarding the aforementioned items, please do not hesitate to contact the undersigned.

Respectfully submitted,

Lillian Garcia, Paralegal,
On behalf of Mark H. Ruff, Esq.

/lg
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Apex Pest Control, Inc.

Name of Corporation

DOCUMENT NUMBER: P99000013665

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:

Peter A. Eldridge

Name of Contact Person

Apex Pest Control, Inc.

Firm/Company

1180 US Highway 1, Suite 105

Address

Rockledge, FL 32955

City/State and Zip Code

pete@apexpest.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark H. Ruff, Esq.

Name of Contact Person

at (407) 951-6679

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: Apex Pest Control, Inc.
2. The principal office address: 1180 US Highway 1, Suite 105
Rockledge, FL 32955
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/11/1999 Document number: P99000013665

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)

FOWLER, BRINK & FOWLER, P.A. 25 MCCLEOD STREET MERRITT ISLAND, FL 32953

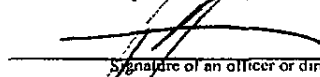
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MARK H. RUFF, ESQ., THE LAW OFFICES OF MARK H. RUFF, P.A.
630 N. WYMORE RD., SUITE 330, MAITLAND, FL 32751

P.O. Box NOT acceptable

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

Peter A. Eldridge - Director

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

08/13/2015

Date

If signing on behalf of an entity:

Mark H. Ruff, Esq.

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)