# P99000043356

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#### **COVER LETTER**

TO: Ame

Amendment Section Division of Corporations

SUBJECT: Hank, Jack, Carol, Inc.

Name of Corporation

DOCHMENT NUMBER

P99000043356

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:

#### Michael B. Stevens

Name of Contact Person

#### Derrevere Stevens Black & Cozad

Firm/Company

2005 Vista Parkway, Suite 210

Address

West Palm Beach, FL 33411

City/State and Zip Code

### kleal@derreverelaw.com

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

For further information concerning this matter, please call:

Michael B. Stevens

, 561

684-3222

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

statement of ch	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida
	the corporation: Hank, Jack, C	egistered agent, or both, in the State of Florida.
		& Cozad, 2005 Vista Parkway, Suite 210, West Palm Beach, FL 33411
2. The principa	l office address:	
3. The mailing	address (if different): P.O. Box 1	999, Jupiter, FL 33469
4. Date of incom	poration/qualification: 5/10/1999	9
	d street address of the current registe artment of State: (If resigned, enter re	ered agent and registered office on file with the signed)
	Michael B. Stevens	2
	1420 Ocean Way, #12-A	2016 - EC
	Jupiter, FL 33477	
6. The name and street address of the new reg (if changed):		l agent (if changed) and /or registered office
	Theodore A. Stevens	<u> </u>
	2005 Vista Parkway, Sui	te 210
	P.O. Box	x NOT acceptable
	West Palm Beach, FL 33	3411
The street addr as changed wil	ress of its registered office and the st	treet address of the business office of its registered agent,
Such change wauthorized by t		opted by its board of directors or by an officer so en notified in writing of the change.
		Michael B. Stevens
I haraby accon	t the appointment as registered agen to comply with the provisions of all f my duties, and I am familiar with a his document is being filed merely to that the corporation has been notif	Printed or typed name and title int and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as registered by reflect a change in the registered office address, I fied in writing of this change.
11/	1 dd	12/9/2016
1-5	gnature of Registered Agent	Date
If signing on b	ehalf of an entity:	
	A. Stevens	
	Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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