## P99000072161

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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JUN 00 2023

S CHAIHAM



## **COVER LETTER**

то:	Amendment Section Division of Corporations	
SUBJI Name	ECT: Chnage Registered Agent of Corporation	
DOCU	JMENT NUMBER: P9900072161	
The en	closed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
Paul Le	epine	
Name o	of Contact Person	
James I	P MCCrory Co., Inc	
Firm/C	ompany	<del></del>
4737 N	Ocean Dr. sui 126	
Addres	SS	
Sea Rai	nch Lakes, FL 33308	
City/St	ate and Zip Code	
E-mail	l address: (to be used for future annual	report notification)
For fur	ther information concerning this matter, p	olease call:
Paul Le	epine	at (954 \ \\ \)540 2076
	Name of Contact Person	at (954 )540 2076  Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT ON BOTTLE FOR CORPORATIONS

minoraer	nge is submitted for a corporation organized under the laws of the State of FLor to change its registered office or registered agent, or both, in the State of Floria	la.	
1. The name of the	he corporation: James P MCCrory Co., Inc		
2. The principal	office address: 4737 N Ocean Dr. sui 126 Sea Ranch Lakes, FL 33308		
3. The mailing ac	ddress (if different):		
4. Date of incorp	poration/qualification: August 13, 1999 Document number: P99000072161	i 	
5. The name and Florida Depar	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	e	
	James P MCCrory Co., Inc		
	1333 S Ocean Dr. sui 306	ζ-	2
	Pompano Beach, FL 33062	:	1023 APR 24
6. The name and (if changed):	i street address of the new registered agent (if changed) and /or registered office		
	Paul Lepine	` J.	P
	4737 N Ocean Dr. sui 126, Sea Ranch Lakes, FL 33308	 	: 58
	P.O. Box NOT acceptable		
Such change wanthorized by the	ess of its registered office and the street address of the business office of its rebe identical.  as anthorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.  What has been notified in writing of the change.	icer s	red agent.
I hereby accept I further agree of my duties, an document is be corporation ha	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comple and familiar with and accept the obligation of my position as registered agent filed merely to reflect a change in the registered office address, I hereby completely in writing of this change.  Appendix of Registred Agent Date	ete pe gent, onfiri	rformance Or if this m that the
/ / /			

\* \* \* 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 (04/13)