

V19374

Timothy J. Warfel

Requester's Name

2015 Centre Pointe Blvd. Ste 105

Address

Tallahassee, FL 32308 942-1919

City/State/Zip

Phone #

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Sullivan Pine Straw, Inc V19374
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

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*****35.00 *****35.00

4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☒ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

no charge
7-2-01
p45

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☒ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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Examiner's Initials

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0602, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida Submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: **Sullivan Pine Straw, Inc.**
2. The mailing address of the corporation: **Route 2 Box ¹⁹⁰22, Mayo, Florida, 32066**
3. Date of incorporation/qualification: **03/06/1992** Document number: **V19374**
4. The name and address of the current registered agent and office:

Timothy J. Warfel
215 South Monroe Street, Suite 701
Tallahassee, Florida 32301

5. The name and address of the new registered agent (if changed) and/or registered office (if changed)
(P.O. Box Not Acceptable)

Timothy J. Warfel
2015 Centee Pointe Blvd.
Tallahassee, FL 32308

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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.

Deborah J. Sullivan Sec.
(Signature of an officer, chairman or vice chairman of the board)

6-27-01
(Date)

If signing on behalf of an entity:

SULLIVAN PINE STRAW, INC.
(Typed or Printed Name)

(Capacity)

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

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE, FLORIDA, 32314