

V56118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900155738449

05/27/09--01006--004 **10.00

05/11/09--01052--013 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAY 27 AM 10:47

R.A. Charge
C.COULLETTE

MAY 27 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Adco South Medical Supplies, Inc.
(Name of Corporation)

DOCUMENT NUMBER: V56118

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:

Tanya Dietrich

(Name of Contact Person)

National Corporate Services, LLC

(Firm/Company)

16055 Space Center Blvd., Ste. 235

(Address)

Houston, TX 77062

(City/State and Zip Code)

For further information concerning this matter, please call:

Tanya Dietrich

(Name of Contact Person)

at (800) 862-5438

(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

May 18, 2009

TANYA DIETRICH
NATIONAL CORPORATE SERVICES, LLC
16055 SPACE CENTER BLVD., STE 235
HOUSTON, TX 77062

SUBJECT: ADCO SOUTH MEDICAL SUPPLIES, INC.
Ref. Number: V56118

We have received your document for ADCO SOUTH MEDICAL SUPPLIES, INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 909A00016757

NATIONAL

Corporate Services, LLC

May 18, 2009

Cheryl Coulliette
Florida Department of State
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Adco South Medical Supplies, Inc.

Dear Cheryl:

Enclosed is the additional \$10 fees required for the change of agent for the above referenced entity. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,


Tanya Dietrich
Senior Corporate Specialist

Encl.

RECEIVED
2009 MAY 22 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Adco South Medical Supplies, Inc.
2. The principal office address: 2525 Old Okeechobee Road, Suite 7-8, West Palm Beach, FL 33409
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/07/92 Document number: V56118
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Anand Patel

2525 Old Okeechobee Road, Suite 7-8

West Palm Beach, FL 33409

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

NRAI Services, Inc.


2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

Weston, FL 33331

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)

Anand Patel, 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)

5/6/09
(Date)

If signing on behalf of an entity:

Tanya Dietrich, Asst. Secretary

(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 (8/05)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAY 27 AM 10:47