

810471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

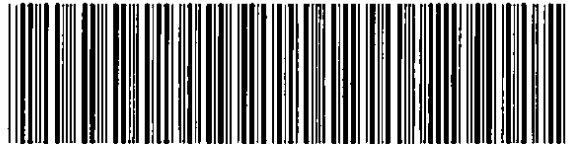
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/29/23--01016--007 **35.00

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2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Wisconsin Evangelical Lutheran Synod
Name of Corporation

DOCUMENT NUMBER: 810471

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:

Beth Thornton
Name of Contact Person
Wisconsin Evangelical Lutheran Synod
Firm/Company
N16W23377 Stone Ridge Drive
Address
Waukesha, WI 53188
City/State and Zip Code

treasury@wels.net

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

For further information concerning this matter, please call:

Beth Thornton at (414) 256-3260
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 FL _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Absolutely Cool Air Conditioning LLC

2. The principal office address: 603 NW Buck Hendry Way, UNIT K, Stuart, FL 34994

3. The mailing address (if different): 2 Mount Royal Ave Ste 550, Marlborough, MA 01752

4. Date of incorporation/qualification: 08/24/2007 Document number: L07000086744

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)

PENCE, DOUGLAS W.

2311 NE 15TH CT

JENSEN BEACH, FL 34957

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

Mahesh Choudhury

2 Mount Royal Ave Ste 550

P.O. Box NOT acceptable

Marlborough, MA 01752


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

Mahesh Choudhury, Manager
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

08/08/23
Date

If signing on behalf of an entity:

Mahesh Choudhury
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 (04/13)