POSOCIO SISSER

ame)		
Phone #)		
IT MAIL		
ty Name)		
mber)		
ficates of Status		
Special Instructions to Filing Officer:		

Office Use Only



400290840494

10/04/16--01006--005 **35.00

0CT 07 2016

4. WHITE

16 0CT -3 AM 9: 15

COVER LETTER

TO: Amendment Section Division of Corporations

SURJECT: Andrew Alexander Inspections, Inc.

Name of Corporation

DOCUMENT NUMBER

P03000056868

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:

Mark A. Harris

Name of Contact Person

Andrew Alexander Inspections, Inc.

Firm/Company

2568 S Conway Road #806

Address

Orlando, FL 32812

City/State and Zip Code

mark@inspectorlando.com

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

For further information concerning this matter, please call:

Mark A. Harris

,407

167-3625

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

	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of Florida	
	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	of the corporation: Andrew Alexander Inspections, Inc.	
2. The principa	al office address: 2568 S Conway Road, Orlando, FL 32812	
· · · · · · · · · · · · · · · · · · ·		
3. The mailing	g address (if different):	
4. Date of incom	prporation/qualification: 05/13/2003 Document number: P03000056868	
	nd street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	
	Lisa B. Harris	
	4253 Conway Place Circle	
	Orlando, FL 32812	
6. The name an (if changed):		
	Mark A Harris	7 4
	2568 S Conway Road #806 ω	· · · · · · · · · · · · · · · · · · ·
	P.O. Box NOT acceptable Orlando, FL 32812	
The street addr as changed wil	dress of its registered office and the street address of the business office of its registered agent, ill be identical.	
Such change wauthorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
	Mark A. Harris, President Printed or typed name and title	
I further agrêe performance o agent. Or, if t <u>l</u>	pt the appointment as registered agent and agree to act in this capacity. e to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as registered this document is being filed merely to reflect a change in the registered office address, I m that the corporation has been notified in writing of this change.	
fun Si	ette 9/28/2016 Signature of Registered Agent 9/28/2016	
If signing on b	behalf of an entity:	
Andrew Ale	lexander Inspections, Inc.	

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

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

Typed or Printed Name