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| (Requestor's Name) | |
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| PICK-UP WAIT MAIL | |
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| (Business Entity Name) | |
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| то: | Amendment Section Division of Corporations | • |
|--------------|---|--|
| SUBJ Name | IECT: Alpha First Construction Inc of Corporation | |
| DOC | UMENT NUMBER: P08000066399 | |
| The e | nclosed Statement of Change of Registered | d Office/Agent and fee are submitted for filing. |
| Please | e return all correspondence concerning this | s matter to the following: |
| Slav I | Oolis | |
| Name | of Contact Person | · |
| Alpha | First Construction Inc | |
| Firm/ | Company | |
| 403 G | ieneva Ave | |
| Addre | ess | |
| Panan | na City Beach, FL 32407 | |
| City/S | State and Zip Code | |
| | alphahomes@comcast.net | |
| E-ma | il address: (to be used for future annua | l report notification) |
| For fu | urther information concerning this matter. | please call: |
| Slav [| | at (850) 527-2667 Area Code & Daytime Telephone Number |
| | Name of Contact Person | Area Code & Daytime Telephone Number |
| Enclo | sed 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 OR BOTH FOR CORPORATIONS

| | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this range is submitted for a corporation organized under the laws of the State of Florida |
|--------------------------------------|---|
| | er to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of | the corporation: Alpha First Construction INc |
| | office address: 403 Geneva Ave, Panama City Beach, FL 32407 |
| | address (if different): |
| 4. Date of incoŋ | poration/qualification: 07/14/2008 Document number: P08000066399 |
| 5. The name and Florida Depar | d street address of the current registered agent and registered office on file with the thentner to factorize the state: (If resigned, enter resigned) |
| | Dolis, Slav |
| | 302 Coconut Grove Ct |
| | Panama City Beach, FL 32407 |
| 6. The name and (if changed): | bolis, Slav Dolis, Slav And Comment 4 |
| | |
| | P.O Box NOT acceptable |
| | Panama City Beach, FL 32407 P.O Box NOT acceptable P.O Box NOT acceptable P.O Box NOT acceptable |
| | ss of its registered office and the street address of the business office of its registered agent, be identical. |
| Such change wa outhorized by th | is authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change. |
| <i>%</i> | Slav Dolis, President |
| | e of an officer Printed or typed name and title |
| of my duties, and locument is bei | the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been patified in writing of this change. |
| Sign | autyre of Registered Argent Date |
| | nalf of an entity: |
| | |
| Ту | ped or Printed Name |

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