P1000076511

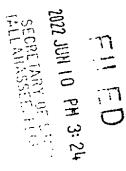
| (Requ | uestor's Name) | |
|---|------------------------|--|
| (Addr | ess) | |
| (Addr | occ) | |
| (Auur | ess) | |
| (City/S | State/Zip/Phone #) | |
| PICK-UP | WAIT MAIL | |
| (Busin | ness Entity Name) | |
| (Docu | ment Number) | |
| | | |
| Certified Copies | Certificates of Status | |
| Special Instructions to Filing Officer: | | |
| | J. HORNE | |
| | AUG 2 6 2022 | |
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Office Use Only



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COVER LETTER

TO:

Amendment Section Division of Corporations

| DDESSIDE DAINT EXTEDIOR | | | |
|--|--|--|--------------------------|
| SUBJECT: PRESSURE POINT EXTERIOR Name of Corporation DOCUMENT NUMBER: P10000076511 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: | | | |
| | | | Diexon Ricardo Gutierrez |
| | | | Name of Contact Person |
| | | | Pressure Point Exterior |
| Firm/Company | | | |
| 3241 NW 212 St | | | |
| Address | | | |
| Miami/Florida 33056 | | | |
| City/State and Zip Code | | | |
| dicxong35pressure@gmail.com | | | |
| E-mail address: (to be used for future annual report notification) | | | |
| For further information concerning this matter, please call: | | | |
| Ed Romano (21, 305-3332879) | | | |
| Name of Contact Person at (305-3332879) Area Code & Daytime Telephone Number | | | |
| Enclosed is a \$35.00 check made payable to the Department of State. | | | |
| Mailing Address: Amendment Section Street Address: Amendment Section | | | |

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

| statement of cha | mge is submitted for a corporation orga | 02, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Florida tered agent, or both, in the State of Florida. | |
|--|--|---|--|
| | 7 | | |
| The name of the corporation: PRESSURE POINT EXTERIOR 2. The principal office address: 3241 NW 212 St. Miami 33056 | | | |
| 3. The mailing a | | | |
| 4. Date of incorporation/qualification: | | | |
| | d street address of the current registered a rtment of State: (If resigned, enter resign | agent and registered office on file with the ed) | |
| | Eduardo A Romano | | |
| | 3 East 36 St Hialcah, FL. 33013 | | |
| 6. The name and (if changed): | Ţ Ţ | ent (if changed) and /or registered office | |
| | Diexon Ricardo Gutierrez | | |
| | 3241 NW 212 St. Miami, FL. 33056 P.O. Bo | ent (if changed) and /or registered office SECRE JUN 10 PR 3: | |
| The street address changed will | ess of its registered office and the street be identical. | address of the business office of its registered agent, | |
| Such change was authorized by the | as authorized by resolution duly adopte he board, or the corporation has been no | d by its board of directors or by an officer so officed in writing of the change. | |
| Signatu | re of an officer of director | Eduardo A Romano Director Printed or typed name and title | |
| I hereby accept I further agree of my duties, ar document is bel corporation has | the appointment as registered agent at to comply with the provisions of all stat ad I am familiar with and accept the obl ing filed merely to reflect a change in th s been notified in writing of this change | nd agree to act in this capacity. Intes relative to the proper and complete performance ligation of my position as registered agent. Or, if this he registered office address, I hereby confirm that the | |
| HACLOY) | KATHE | 5/31/22 | |
| Sig | nature of Register of Agent | Date | |
| If signing on be | chalf of an entity: | | |
| Diexon Ricardo | Gutierrez | | |
| T | yped or Printed Name | | |

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