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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_

## **REGISTERED AGENT CHANGE** SOUTHERN CONTRACTING, INC.

Certificate of Status	0
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Page Count	02
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OCT 1 2 2017

S. YOUNG

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statement of cha	ange is submitted for a corporation orga	502, 607,1508, or 617,1508, Florida Statutes, this unized under the laws of the State of Florida stered agent, or both, in the State of Florida.	<del>-</del>
1. The name of	the corporation: SOUTHERN CONTR	ACTING, INC.	
2. The principal	office address: 2389 E VENICE AVE #4		
VENICE, FL	_ 34292		
3. The mailing a	address (if different):		<del></del>
4. Date of incor	poration/qualification: 09/29/2017	Document number: P17000079627	
	d street address of the current registered artment of State: (If resigned, enter resigned)	l agent and registered office on file with the ned)	
	HOWARD, TIMMY		
	2850 WORTH AVE		
	ENGLEWOOD, FL 34224		
6. The name and (if changed):		ent (if changed) and /or registered office	; 3 जा
	Registered Agents Inc.		· =
	3030 N. Rocky Point Dr. STE	150A E O	
		OT acceptable	<b>₹</b> 0
	Tampa FL 33607		ა ე:
The street address changed will	ress of its registered office and the stree I be identical.	et address of the business office of its registered age	ont,
Such change was authorized by the	as authorized by resolution duly adopte he board, or the corporation has been n	ed by its board of directors or by an officer so otified in writing of the change.	
_ ( In	may toward	Timmy Howard, Director	_
I hereby accept I further agree performance of	f my duites-and Lain familiar with and	Printed or typed name and title and agree to act in this capacity. Itutes relative to the proper and complete accept the obligation of my position as registered flect a change in the registered office address, I in writing of this change.	
Bec Han	ne	10/09/2017	
Sig	gomure of Registered Agent	Date	-
If signing on be	chalf of an entity:		
Bill Havre			
Т	Typed or Printed Name	DT: 025.00 + + +	
	* * * FILING F	EE: \$35.00 * * *	