P70 0000000038

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



800345414688

06/11/20+-01008+-008 **35.00

2020 JUL 15 MH 7: 49

RAIRDChg

JUL 2 5 5020

I ALBRITTON

COVER LETTER

TO:

Amendment Section Division of Corporations

Roberns Structural Design Inc	
SUBJECT: Behrens Structural Design, Inc. Name of Corporation	
DOCUMENT NUMBER: P20000000038	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Ronald G Behrens	•
Name of Contact Person	
Behrens Structural Design, Inc.	
Firm/Company	
9789 Via Verga Street	
Address	
Lake Worth, FL 33467	
City/State and Zip Code	
rbehrens@asdgllc.com	
E-mail address: (to be used for future annua	I report notification)
For further information concerning this matter, p	please call:
Ronald G Behrens	at (618) 918-1910 Area Code & Daytime Telephone Numbe
Name of Contact Person	Area Code & Daytime Telephone Numbe
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address:
	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
imminoso, iti dedi i	Tallahassee, FL 32303

CR2E045 (04/13)



June 29, 2020

RONALD G. BEHRENS 9789 VIA VERGA STREET LAKW WORTH, FL 33467

SUBJECT: BEHRENS STRUCTURAL DESIGN INC.

Ref. Number: P2000000038

We have received your document for BEHRENS STRUCTURAL DESIGN INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 920A00012785

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

statement of che	ange is submitted for a corpora	22, 617.0502, 607.1508, or 617.1508, Florida Statut ution organized under the laws of the State of Florid	la
-	. .	e or registered agent, or both, in the State of Florid	'a.
	the corporation: Behrens Struct		
2. The principal Lake Worth, Flo	office address: 9789 Via Verga orida 33467	Street	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: January	2, 2020 Document number: P20000000038	
	d street address of the current re rtment of State: (If resigned, en	egistered agent and registered office on file with the nter resigned)	:
	Business Filings Incorporated		
	1200 South Pine Island Road		207
	Plantation, Florida 33324		2020 JUL 15
6. The name and (if changed):	d street address of the new regis	stered agent (if changed) and /or registered office	15 AH
	Ronald G. Behrens		ـــــ بــ ا
	9789 Via Verga Street		9.1.F
		P.O. Box NOT acceptable	•
	Lake Worth, Florida 33467		
The street addreas changed will	ess of its registered office and be identical.	the street address of the business office of its regi	stered agent,
Such change wa authorized by th	as authorized by resolution dul ne board, or the corporation ha	ly adopted by its board of directors or by an office as been notified in writing of the change.	er so
Marc	re of an officer or director	Ronald G. Behrens, President	
		Printed or typed name and title	
I further agree i of my duties, an document is bei corporation has	the appointment as registered to comply with the provisions of a lam familiar with and acception of the field merely to reflect a character motified in writing of this control of the con	l agent and agree to act in this capacity. of all statutes relative to the proper and complete pt the obligation of my position as registered ager ange in the registered office address, I hereby con is change.	performance it. Or, if this firm that the
Fords	65h	July 8, 2020	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Ronald G Behren	as		
Ty	ped or Printed Name		

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