P97000076006

(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: RICK'S CONST. INC. Name of Corporation		
DOCUMENT NUMBER:		
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:		
RICHARD GUBOOG Name of Contact Person		
RICKS CONST. INC. Firm/Company		
2608 Austin St. Address		
SACASOTA F(3403) City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
RICHARD GUSSON at (Q41)922 1609 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

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Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2011

RICHARD GUBODY 2608 AUSTIN ST SARASOTA, FL 34231

SUBJECT: RICK'S CONSTRUCTION, INC.

Ref. Number: P97000076006

We have received your document for RICK'S CONSTRUCTION, 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):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

Please be sure the street address of the NEW registered agent is legible. The date of Incorporation is 09-02-1997. Please see enclosed printout.

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) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 111A00013547

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

Pursuant to the provisions of sections 607.0502, 617.0502, 60	(
statement of change is submitted for a corporation organized	
in order to change its registered office or registered	agent, or both, in the State of Florida.
1. The name of the corporation: PICKS CONS	TRUCTION, INC.
2. The principal office address: 2608 Austi	N ST:
SARASOTA, FL	. 34231
3. The mailing address (if different):	the state of the s
4. Date of incorporation/qualification: 9-2-97	Document number: <u>P97000076006</u>
5. The name and street address of the current registered agent Florida Department of State: (If resigned, enter resigned)	and registered office on file with the
RICHARD GURDY	
	1.
2608 AUTIN 55	
SARASOTA FL 342	3. <u>S</u> 4 7 .
6. The name and street address of the new registered agent (if	changed) and for registered office
(if changed):	changed) and 701 registered office?
Shawa Cobacly	
3525 Inagua Aur	
P.O. Box NOT acce	ptable
IVOITA PORT FI	1286
The street address of its registered office and the street addr as changed will be identical.	ess of the business office of its registered agent,
Such change was authorized by resolution duly adopted by authorized by the board, or the corporation has been notified	its board of directors or by an officer so d in writing of the change.
KS ST	ICHARD GURDON PROSIDENT
Signature of all officer or director	Printed or typed name and title
I hereby accept the appointment as registered agent and ag I further agree to comply with the provisions of all statutes of my duties, and I am familiar with and accept the obligati document is being filed merely to reflect a change in the reg corporation has been notified in writing of this change.	ree to act in this capacity. relative to the proper and complete performance on of my position as registered agent. Or, if this gistered office address, I hereby confirm that the
Muss	5-23-11
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Shace L Orbody Typed or Printed Name	

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

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