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C. GOLDEN MAY 1 3 2019

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: BSDDA CARPENTER INC.

Name of Corporation

DOCHMENT NUMBER:

P09000043286

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:

MARSHA SIHA

Name of Contact Person

INCFILE.COM LLC

Firm/Company

17350 STATE HWY 249 STE 220

Address

HOUSTON, TX 77064

City State and Zip Code

EFILE1234@INCFILE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARSHA SIHA

...855

329-9090

Name of Contact Person

Area Code & Davtime 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 323 4

Street Address:

Amendment Section Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of cha	mge is submitted for a corporation	617.0502. 607.1508, or 617.1508, Florida Statutes, this in organized under the laws of the State of FLORIDA
		r registered agent, or both, in the State of Florida.
1. The name of t	the corporation: BSDDA CA	RPENTER INC.
2. The principal	office address: 14660 HIDI	EN MEADOW DR., DUBUQUE, IA 52002
3. The mailing a	ddress (if different): 11541 SW	ROSSANO LANE, PORT SAINT LUCIE, FL 34987
4. Date of incorp	poration/qualification: 05/15/2	009 Document number: P0900043286
	I street address of the current regi tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)
	URS AGENTS, LLC	
	3458 Lakeshore Drive	20
	Tallahassee, FL 32312	E 1 1 2019 APR 20
6. The name and (if changed):	I street address of the new registe	red agent (if changed) and /or registered office
	LEGALINC CORPORA	_ ,
	5237 SUMMERLIN CO	MMONS SUITE 400
	FORT MYERS, FL 33	BOX NOT acceptable
The street addre	ess of its registered office and the be identical.	street address of the business office of its registered agent,
Such change wa authorized by th	is authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
Derek	to of an officer of director	DEREK KOPP - PRESIDENT/DIRECTOR
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm	the appointment as registered a o comply with the provisions of my duties, and I am familiar with document is being filed merely that the corporation has been no	gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as registered to reflect a change in the registered office address. I uified in writing of this change.
(tatty	Sclimenti	04/17/2019
\cup \cup	nature of Registered Agent half of an entity:	Date
PATTY SC	•	
Ту	ped or Printed Name	-
	* * * F[L]	NG FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)