I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

SIGNATURE: ROBERT MOORE

Electronic Signature of Signing Officer/Director Detail

Entity Name: NORTH FLORIDA CONSTRUCTION SOLUTIONS INC

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

8609 EMERALD ISLE CIR S JACKSONVILLE, FL 32216

Current Mailing Address:

8609 EMERALD ISLE CIR S JACKSONVILLE, FL 32216 US

FEI Number: 46-4282525

Name and Address of Current Registered Agent:

MOORE, ROBERT L 8609 EMERALD ISLE CR S JACKSONVILLE, FL 32216 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PRESIDENT, VP	Title	SECRETARY, TREASURER
Name	MOORE, ROBERT L	Name	MOORE, PAIGE O
Address	8609 EMERALD ISLE CIR S	Address	8609 EMERALD ISLE CIR S
City-State-Zip:	JACKSONVILLE FL 32216	City-State-Zip:	JACKSONVILLE FL 32216

above, or on an attachment with all other like empowered. 03/13/2018 PRESIDENT

Date

FILED Mar 13, 2018 Secretary of State CC6110521572

Certificate of Status Desired: Yes

Date