SIGNATURE: Electronic Signature of Registered Agent

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.

### Officer/Director Detail :

Title	Р
Name	OLIVEIRA, SAMUEL A
Address	3519 WEST ATLANTIC BOULEVARD APT 1209
City-State-Zip:	POMPANO BEACH FL 33069

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 above, or on an attachment with all other like empowered.

Ρ

SIGNATURE: SAMUEL A OLIVEIRA

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# P16000055035

Entity Name: ULTRA CONSTRUCTION & REMODELING INC.

#### **Current Principal Place of Business:**

3519 WEST ATLANTIC BOULEVARD APT 1209 POMPANO BEACH, FL 33069

#### **Current Mailing Address:**

3519 WEST ATLANTIC BOULEVARD APT 1209 POMPANO BEACH, FL 33069 US

#### FEI Number: 81-3048900

#### Name and Address of Current Registered Agent:

OLIVEIRA, SAMUEL A 3519 WEST ATLANTIC BOULEVARD APT 1209 POMPANO BEACH, FL 33069 US Certificate of Status Desired: No

Date

04/28/2017 Date

## FILED Apr 28, 2017 Secretary of State CC6996903647