

300014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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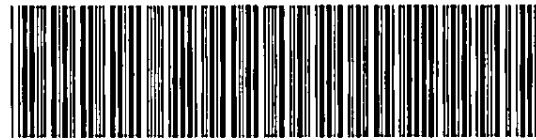
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2021 AUG 19 PM 2:59  
SECRETARY OF STATE  
TALLAHASSEE, FL

A. Butler  
8/30/21

Attn: Florida Dept. of State Registration Section and/or Amendment Section

Please note, the check enclosed is set to covers **ALL** entities provided in the forms herein. Please distribute the funds as so. We verified this was acceptable when we called the Florida Dept. of State directly and spoke to an employee.

Thank you,

Damaso W. Saavedra, Esq.  
Managing Partner of Saavedra-Goodwin  
Registered Agent

Contact Info:  
954-767-6333  
[myates@saavlaw.com](mailto:myates@saavlaw.com)

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HOLLAND BUILDERS, INC.  
Name of Corporation

**DOCUMENT NUMBER:** 300014

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:

Damaso W. Saavedra

Name of Contact Person

Saavedra-Goodwin

Firm/Company

888 S.E. 3rd Avenue, Suite 500

Address

Fort Lauderdale, Florida 33316

City/State and Zip Code

dpazo@saavlaw.com

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

For further information concerning this matter, please call:

Deanna Pazo

at ( 954 ) 767-6333

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

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida.

in order to change its registered office or registered agent, or both, in the State of Florida.

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1. The name of the corporation: HOLLAND BUILDERS, INC.

2. The principal office address: 4860 N.E. 12TH AVENUE FORT LAUDERDALE, FL 33334

3. The mailing address (if different): 4860 N.E. 12TH AVENUE FORT LAUDERDALE, FL 33334

4. Date of incorporation/qualification: 12/21/1965 Document number: 300014

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SAAVEDRA, DAMASO W, ESQ.

312 S.E. 17TH STREET,SECOND FLOOR FORT LAUDERDALE, FL. 33316

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SAAVEDRA, DAMASO W, ESQ.

888 S.E. 3rd Avenue, Suite 500

P.O. Box NOT acceptable

Fort Lauderdale, Florida 33316

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

*Jack M. Holland*  
Signature of an officer or director

Gerald M. Holland  
Printed or typed name and title

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed ~~hereby~~ to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

\_\_\_\_\_  
Signature of Registered Agent

8-13-21

Date \_\_\_\_\_

If signing on behalf of an entity:

Typed or Printed Name \_\_\_\_\_

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

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)