## 340911

(Requestor's Name)	
(Address)	_
(Addless)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Griggs Plumbing Co. Name of Corporation
DOCUMENT NUMBER: 340911
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:
Christy Mohles Name of Contact Person  Griggs Plumbing Co. Firm/Company  1317-13 Av. W. Address  Bradinton, FL 34305 City/State and Zip Code  Griggs Plumbing C Yahow. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christy Mohles at (941) 748-3151 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 Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## 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.	
1. The name of the corporation: 6riggs Plumbing (D.	
1. The name of the corporation: 601995 Plumbing (D.  2. The principal office address: 1317 12 Av. W Bradenton, FL 34305	
3. The mailing address (if different):	_
4. Date of incorporation/qualification:	
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)	
Jeffrey L. Mohler	
Jeffrey L. Mohler 5469 80th Av. G. E.	
Palmetto, FL 34221	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Ryan J. Mohler  9.320 Carr Rd.  P.O. Box NOT acceptable  RIVELVIEW, FL 335×69	7
RIVILVICW, FL 33569  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.    Signature of an officer or director	
Typed or Printed Name	

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