429166

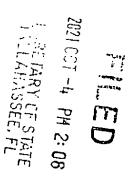
(Requestor's Name)					
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(Addı	ress)				
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
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10/04/21--01015--029 **35.00



COVER LETTER

TO:	Amendment Section Division of Corporations	
	ECT: Lewis Oil Co., Inc. of Corporation	
DOC	UMENT NUMBER: 429166	
The er	nclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
Wenda	a A. Lewis	
Name	of Contact Person	
Lewis	Oil Co., Inc.	
Firm/0	Company	
621 SI	E Depot (7th) Avenue	
Addre	SS	
	sville, Florida 32601	
City/S	tate and Zip Code	
	włewis@lewisoilco.com	
E-mai	il address: (to be used for future annua	l report notification)
For fu	rther information concerning this matter. p	please call:
Jeffrey R. Dollinger		at (352) 416-3419 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address:
Amendment Section Division of Corporations		Amendment Section Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corpora)2, 617.0502, 607.1508, or 617.1508, Florida Station organized under the laws of the State of Flo	orida		
		e or registered agent, or both, in the State of Flo	rida.		
	the corporation: Lewis Oil Co.,				
2. The principal	office address: 621 SE Depot (7th) Avenue, Gainesville, Florida 32601			
3. The mailing a	ddress (if different):				
4. Date of incorp					
5. The name and		registered agent and registered office on file with	the		
	Jualene O. Lewis				
	621 SE Depot (7th) Avenue				
	Gainesville, Florida 32601				
6. The name and (if changed):	I street address of the new regi	istered agent (if changed) and /or registered offic	e		
	Wenda A. Lewis				
	621 SE Depot (7th) Avenue				
	Gainesville, Florida 32601	P.O. Box. NOT acceptable			
The street addre	ess of its registered office and be identical.	I the street address of the business office of its p	regist ere d agent.		
		ily adopted by its board of directors or by an of the change.			
	cola a Ju	Wenda A. Lewis, President Printed or typed name and info	AR)		
I further agrée t of my duties, an document is bei	the appointment as registered comply with the provisions of I am familiar with and acceng filed merely to reflect a character notified in writing of the	d agent and agree to act in this capacity. of all statutes relative to the proper and complete the obligation of my position as registered along in the registered office address. I hereby			
eve.	elic G. Lycip nature of Registered Agent	4/23/21			
If signing on be	half of an entity:	·			
Wenda A. Lewis					
Ty	eped or Printed Name				

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