

623834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

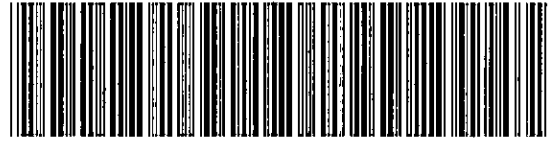
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JAN 10 2020
ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PRIME DRYWALL & PAINTING, INC.
Name of Corporation

DOCUMENT NUMBER: 623834

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:

Jon Michael Kendrick, Esq.

Name of Contact Person

The Kendrick Law Firm

Firm/Company

1776 N. Pine Island Road, Suite 118

Address

Plantation, FL 33322

City/State and Zip Code

Jon Kendrick <jmk@kendrick-lawfirm.com>

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

For further information concerning this matter, please call:

Jon Michael Kendrick

Name of Contact Person

at (954) 776-8115

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: PRIME DRYWALL & PAINTING, INC.
2. The principal office address: 4503 NORTHWEST 103rd AVENUE SUITE #102
SUNRISE FLORIDA 33351
3. The mailing address (if different): _____
4. Date of incorporation/qualification: JUNE 6, 1979 Document number: 623834
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)

JOSEPH MICHAEL ANSAROFF

4503 NW 103 AVE STE 102
SUNRISE, FL 33351

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

Jon Michael Kendrick, Esq.

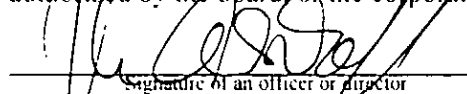
1776 N. Pine Island Road, Suite 118

P.O. Box NOT acceptable

Plantation, FL 33322

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

JOSEPH MICHAEL ANSAROFF

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 merely 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

DECEMBER 2, 2019

Date

If signing on behalf of an entity:

Jon Michael Kendrick

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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TALLAHASSEE, FLORIDA