## 655/65

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C. LEWIS

SEP 1 0 2014

EXAMINER

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Name of Corporation

DOCUMENT NUMBER: 655165

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:

Freeman Mullet

Name of Contact Person

Mullet's Aluminum Products, Inc.

Firm/Company

6345 McIntosh Rd.

Address

Sarasota FL 34238-2712

City/State and Zip Code

butch@mulletsaluminum.com

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

For further information concerning this matter, please call:

Freeman (Butch) Mullet

Name of Contact Person

at (941 ) 356-2626

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

statement of ch	errovisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: Mullet's Aluminum Products, Inc.  I office address: 6345 McIntosh Rd. Sarasota FL 34238-2712	
3. The mailing	address (if different):	
4. Date of incor	rporation/qualification: 2/7/1980 Document number: 655165	
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Freeman Mullet	
	905 Ponder Ave.	
	Sarasota FL 34238-2712	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	P.O. Box NOT acceptable	
	Sarasota FL 34238-2712	
=	ess of its registered office and the street address of the business office of its registered agent, be identical.	
authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
/	Freeman Mullet tresident	-
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
7	gnature of Registered Agent 8-25-2014  Date	
f signing on be	chalf of an entity:	
Freeme	yped 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 (03/12)