

A24000000004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

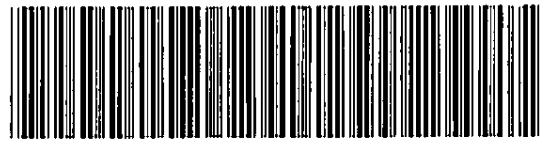
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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FILED  
2025 MAY -2 AM 11:45  
TALLAHASSEE, FLORIDA

RECEIVED  
2025 MAY -2 AM 11:22  
TALLAHASSEE, FLORIDA



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations  
From: Amanda Miller - Amanda.Miller@cscglobal.com  
Ext: x62969  
Date: 05/02/25  
Order #: 1951081-13  
Re: STRUCTURAL BUILDING COMPONENTS LP  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35.00 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis

Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive

Wilmington, DE 19808

A handwritten signature in black ink, appearing to read 'Amanda Miller', is written in a cursive style.

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. STRUCTURAL BUILDING COMPONENTS LP  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 12/28/2023 Date of filing/registration in Florida  
3. A24000000004 Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

WOLTJER, MIKE  
Name  
668A S. MILITARY TRAIL  
Address  
DEERFIELD BEACH, FL 33442  
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company  
Name  
1201 Hays Street  
Florida street address (P.O. Box not acceptable)  
Tallahassee FL 32301  
City, State and Zip

TALLAHASSEE, FLORIDA

2025 MAY -2 AM 11:45

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6. Such change(s) is/are effective when filed by the Florida Department of State.

/S/ MIKE WOLTJER  
Signature of General Partner

*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 obligations of my position as registered agent.*

/S/ Grace E. Kirby  
Signature of Registered Agent

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50