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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

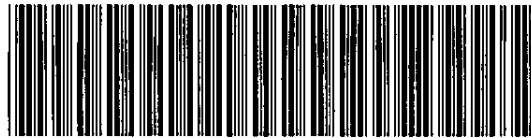
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Angelo's Aggregate Materials, LTD
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A97000001016

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Jack Hirschauer

Contact Person

Angelo's Agregate Materials, LTD

Firm/Company

855 28th Street S

Address

St Petersburg, FL 33712

City, State and Zip Code

jhirschauer@angelosrm.com

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

For further information concerning this matter, please call:

Jack Hirschauer

Name of Contact Person

at (727)

Area Code and Daytime Telephone Number

581-1544

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**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. Angelo's Aggregate Materials, LTD
Name of Limited Partnership or Limited Liability Limited Partnership
2. 05/07/1997 3. A97000001016
Date of filing/registration in Florida 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:

Jack Hirschauer
Name
2100 E Bay Dr, Suite 205
Address
Largo, FL 33771
City, State and Zip

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

Jack Hirschauer
Name
855 28th Street S
Florida street address (P.O. Box not acceptable)
St Petersburg FL 33712
City, State and Zip

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

[Signature]
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.

[Signature]
Signature of Registered Agent

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

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SECTION 620.1115
FALL 1997
FLORIDA