F1100000 3040

(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

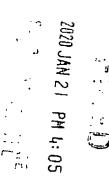


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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI Name	ECT: SUMMIT CONSTRUCTION, INC. OF SANTA ROSA BEACH of Corporation
DOCU	JMENT NUMBER: F11000003040
The en	aclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Nancy	E. Blackwell
Name	of Contact Person
Chinne	ery Evans & Nail, PC
Firm/C	Company
800 NI	E Vanderbilt Lane
Addre	SS
Lee's S	Summit, MO 64064
City/S	tate and Zip Code
	swilliams@chinnery.com
E-mai	address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
Joseph	Name of Contact Person at (850) 660-1019 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 **Division of Corporations**

P.O. Box 6327 Tallahassec, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (04/13)

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

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of MISSOURI
	to change its registered office or registered agent, or both, in the State of Florida. se corporation: SUMMIT CONSTRUCTION, INC. OF SANTA ROSA BEACH
The name of th The principal of	office address: 120 Commercial Parkway, Santa Rosa Beach, FL 32459
3. The mailing ad	ldress (if different):
4. Date of incorpo	pration/qualification: July 25, 2011 Document number: F11000003040
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
	Charles D. Johnson
·	4635 W. County Highway, 30A
	Santa Rosa Beach, FL 32459
6. The name and (if changed):	Santa Rosa Beach, FL 32459 Street address of the new registered agent (if changed) and /or registered office
	Joseph L. Wommack 463 Clareon Dr
·	
	P.O Box NOT acceptable CD CD
	Panama City Beach, FL 32461
The street address as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
South	JOSEPH L. WOMMACK, PRESIDENT Printed or typed name and title
I further agree to of my duties, and document is bein corporation has	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 performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this age filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
cooph	Manual 09 Jan 20 Date
If signing on bel	
JOSEPH L. WOX	MMACK
Ту	ped or Printed Name

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