F190000005047

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
wait	MAIL			
(Business Entity Name)				
(Document Number)				
Certificates of S	Status			
Special Instructions to Filing Officer:				
	(Address) (Address) (City/State/Zip/Phone #) WAIT (Business Entity Name) (Document Number) Certificates of S			

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MAR 1.8 2022 I ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 560301 8368380

AUTHORIZATION

COST LIMIT

ORDER DATE: March 17, 2022

ORDER TIME : 2:30 PM

ORDER NO. : 560301-003

CUSTOMER NO: 8368380

CHANGE OF AGENT

NAME:

HOMEFIX CUSTOM REMODELING

CORP.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 61 inge is submitted for a corporation r to change its registered office or	organized under the la	tws of the State of N	MD	
1. The name of t	the corporation: HOMEFIX CUSTO	M REMODELING CO	PRP.		
	office address: 8840 Stanford Blvd				
	3 JOH AVE. SUITE:188 BALTIMO				
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 11/06/2019	alification: 11/06/2019 Document number: F19000005047			
	I street address of the current regist tment of State: (If resigned, enter r		red office on file wit	h the	
	InCorp Services, Inc.			. ~	
	17888 67th Court North			2022 MAR 17 SFALL AHA	
	Loxahatchee	FL	33470	R A	
6. The name and (if changed):	I street address of the new registere	d agent (if changed) ar	nd /or registered offi	· n	
	Corporation Service Company			건물	
1201 Hays Street					
	Tallahassee	PO Box NOT acceptable FL	32301		
The street addre as changed will	ess of its registered office and the be identical.			registered agent.	
Such change wa authorized by th	s authorized by resolution duly ac the board, or the corporation has be	dopted by its board of en notified in writing	directors or by an cof the change.	officer so	
Combine		Toptan Lala, P			
I hereby accept I further agree t of my duties, and document is bein corporation has	the appointment as registered age o comply with the provisions of a d I am familiar with and accept th ng filed merely to reflect a change been notified in writing of this ch n Service Company	ent and agree to act in Il statutes relative to to te obligation of my po t in the registered office			
By: Y)	rature of Registered Agent		Date		
	half of an entity:		·		
GRACE E. KIRB	Y, ASST. VICE PRESIDENT				
	ped 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)