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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 : (561)694-8107

Phone Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

REGISTERED AGENT CHANGE SEH DESIGN/BUILD, INC.

Certificate of Status	0
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Help

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

statement of cha	provisions of sections 607,0502, 617,0502, 607.1. nge is submitted for a corporation organized und	er the laws of the State of Minneso		_
	r to change its registered office or registered ages he corporation: SEH DESIGN/BUILD, INC.	nt, or both, in the State of Florida.		
2. The principal	office address: 3535 VADNAIS CENTER DR. ST.	PAUL, MN 55110		_
3. The mailing a	ddress (if different):			_
4. Date of incorp	poration/qualification: 11/03/2020 Do	ocument number: F20000004924		
	I street address of the current registered agent and timent of State: (If resigned, enter resigned)	registered office on file with the		
	CORPORATION SERVICE COMPANY		57,	6 2
	1201 HAYS STREET			021 J
	TALLAHASSEE, FL 32301-2525		ALLAHASSEE, FL	2021 JUN 24
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				<u> </u>
	United Agent Group Inc.			± ⊕
	801 US Highway I			_
	P.O. Box NOT acce North Palm Beach, FL 33408	prabke		
The street address changed will	ess of its registered office and the street address be identical.	of the business office of its registe	red ager	nt,
	as authorized by resolution duly adopted by its be board, or the corporation has been notified in			
Zu	Laure	n Underwood, Attorney-in-Fact		
Signatu	re of an officer or director	Printed or typed name and title		-
I further agrée of my duties, an document is bei	the appointment as registered agent and agree to comply with the provisions of all statutes rela d I am familiar with and accept the obligation o ng filed merely to reflect a change in the registe Been notified in writing of this change.	tive to the proper and complete po If my position as registered agent.	erforman Or, if the on that th	ice tis he
Zu	06/24/	2021		
Sig	nature of Registered Agent	I)ue		_
If signing on be	half of an entity:			
Lauren Underwo	od, Special Secretary			
.i.	yped or Printed Name			
	* * * FILING FEE: \$35.9	00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)