

H23000021663 3

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**F 99 00005284**

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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : INCORP SERVICES INC  
Account Number : 126120030007  
Phone : (702)866-2500  
Fax Number : (702)900-2290

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REGISTERED AGENT CHANGE  
RIVER CITIES BUILDERS, INC.

Certificate of Status	0
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** River Cities Builders, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F99000005284

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Courtney Wehrman  
Name of Contact Person

InCorp Services, Inc.  
Firm/Company

3773 Howard Hughes Pkwy. · Suite 500S  
Address

Las Vegas, NV 89169-6014  
City/State and Zip Code

documents@incorp.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Courtney Wehrman on behalf of InCorp Services, Inc. at 800-246-2677  
Name of Contact Person Area Code & Daytime Telephone Number

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

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of KY in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: River Cities Builders, Inc.

2. The principal office address: 175 SANDY COVE, GREENUP, KY 41144

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 10/07/1999 Document number: F99000005284

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

FELTY, RICCA  
\_\_\_\_\_  
180 FLAGLER LANE APT 27  
\_\_\_\_\_  
COCOA BEACH, FL 32931  
\_\_\_\_\_

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

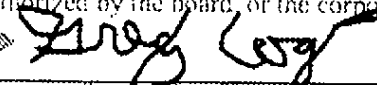
InCorp Services, Inc.  
\_\_\_\_\_  
17888 67th Court North  
\_\_\_\_\_  
Loxahatchee, FL 33470  
\_\_\_\_\_

P.O. Box NOT acceptable

2023 JAN 18 AM 10:39

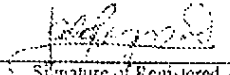
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

GREGORY T LOGAN, President  
\_\_\_\_\_  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
\_\_\_\_\_  
Signature of Registered Agent

January 11, 2023  
\_\_\_\_\_  
Date

If signing on behalf of an entity:  
Isabel Burgos on behalf of InCorp Services, Inc.  
\_\_\_\_\_  
Typed or Printed Name

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