PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PLICATION FOR STATEMENT	FLORI :	DA DEPARTME Katherine H Secretary of DIVISION OF CORPO	State		TILED IKE FARY OF STAT OH OF CORPORAT	ſt.	
DOCUMENT # G68330 1. Compation Name HURLEY PIPE AND SITE, INC.						OCT 29 PM 1:2		
•	ace of Business STREET EAST FL 34221	3105 171	Mailing Address 3105 17TH STREET EAST PALMETTO FL 34221		EINSI	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		
	ncipal Office Address, If Appli	cable 3. New N	ugh incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 11/08/1983			
City & State		City & Sta	te		5. FEI Number 59-2404115 Applied For Not Applicable			
Zip Country		Zip			CERTIFICATE OF STATUS DESIRED S8./5 Additional Fee required for a Certificate of Status			
7. Names a	Name o	n Officer and/or Director (f Officers Directors	r Director (Florida nonprofit corporations must list at Street Address of Ea Officer and/or Direct 6105 47TH AVE. E		St 3 directors) City / State / Zip BRADENTON FL 34203			
VPS HURLEY JERRY C.			6105 47TH AVE. E.			BRADENTON FL 34203		
				- \ \	£_11	10004690 -11/20/01 ****750.00		
				R.	11/12			
Name and Address of Current Registered Agent Name						ddress of New Registere		
HURLEY, JOAN K. 6105 47TH AVE. E. BRADENTON FL 34203				Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code				
10. I, being Signature of Registered /		NATHR.	Mure	with and accept the ob	oligations of Section	pn 607.0505, F.S. Date _/0/24		
this reins owed by	that I am an officer or directo statement application, the rea the corporation have been p pplication is true and accurat	r or the receiver or trustee son for dissolution has be aid and the names of ind e, and my signature shall	en eliminated, the cor viduals listed on this f have the same legal e	porate name satisfies form do not qualify for a	the requirements an exemption und	of section 607.0401 or 617	.0401, F.S., that all fees	
SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #								