H44738

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Alworld Hardware & Lumber co., Inc.

Name of Corporation

DOCUMENT NUMBER: F

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:

Emmanuel C Alexiou

Name of Contact Person

Alworld c/o Jerome R Schechter, PA

Firm/Company

1995 E Oakland Park Blvd ste 210

Address

Ft Lauderdale, FI 33306

City/State and Zip Code

ecalexiou@suncobahamas.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerome Schechter

954 .7

7647600

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
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

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

statement of ch	e provisions of sections 607.0502, 617.05 ange is submitted for a corporation orga er to change its registered office or regis	mized under the laws of	the State of Fl	orida
1. The name of	the corporation: Alworld Hardwa	re & Lumber co. I	Inc.	orida.
2. The principal Ft Laude	l office address: 1995 E Oakland erdale, FI 33306	Park Blvd ste 210	0	
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 2/27/85	Document numbe	_{er:} H44738	<u> </u>
5. The name and Florida Depar	d street address of the current registered runent of State: (If resigned, enter resign	agent and registered officed)	ce on file with	the
	Alicia Feinsmith (resigned)			
6. The name and	i street address of the new registered age		2018 J	-11
(if changed):	Jerome R Schechter	m (11 changed) and for re	egistered office PRASSE	
	1995 E Oakland Park Blvd s		2 T S	M
	Ft Lauderdale, FI 33306		17. 15. 25. 0. 10. A	.—
The street addre	ss of its registered office and the street be identical.	address of the business	office of its re	gistered agent,
Such change was authorized by the	s authorized by resolution duly adopted e board, or the corporation has been not	by its board of director	s or by an offi hange.	cer so
Signature	e of an officer of director	J-cs	come S	hechter
Thereby accept to I further agree to performance of p agent. Or, if that hereby confirm to	the appointment as registered agent and comply with the provisions of all statuted daties, and I am familiar with and act document is being filed merely to reflect the corporation has been notified in	l agree to act in this cap ites relative to the prope scept the obligation of n ict a change in the regis i writing of this change.	pacity, er and comple my position as stered office ac	te registered idress, I
	anure of Registered Agent	6/11	,	
f signing on beh		· Day	15	
Тур	ed 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 (03/12)