

J95359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

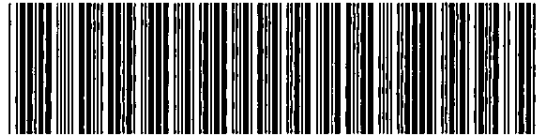
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300138351263

12/19/08--01008--001 **10.00

12/03/08--01008--014 **25.00

2008 DEC 17 PM 4:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Recharge
Lewis
12-22-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: UNIVERSITY PAINTING CONTRACTORS, INC.
(Name of Corporation)

DOCUMENT NUMBER: J95359

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:

CYNTHIA K. GRACE
(Name of Contact Person)

UNIVERSITY PAINTING CONTRACTORS, INC.
(Firm/Company)

9912 SW 54th LANE
(Address)

GAINESVILLE, FL 32608
(City/State and Zip Code)

For further information concerning this matter, please call:

CYNTHIA K. GRACE at (352) 332-9893
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 9, 2008

EDWARD A. GRACE, JR.
UNIVERSITY PAINTING CONTRACTORS, INC.
9912 SW 54TH LANE
GAINESVILLE, FL 32608

SUBJECT: UNIVERSITY PAINTING CONTRACTORS, INC.
Ref. Number: J95359

We have received your document for UNIVERSITY PAINTING CONTRACTORS, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 508A00059658

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 DEC 17 AM 8:00

RECEIVED

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: UNIVERSITY Painting Contractors INC.
2. The principal office address: 9912 SW 54th LANE
GAINESVILLE, FL. 32608
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9/29/1987 Document number: J 95359

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)

CYNTHIA K. GRACE
10815 SW 200th PLACE
GAINESVILLE, FL 32607

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

CYNTHIA K. GRACE
9912 SW 54th Lane
(P.O. Box NOT acceptable)
GAINESVILLE, FL. 32608

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.

Cynthia K. Grace
(Signature of an officer or director)

CYNTHIA K. GRACE
(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)

(Date)

If signing on behalf of an entity:

(Typed 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 (8/05)

FILED
2008 DEC 17 PM 4:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA