KOZ868

(Requestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of S	Status		
Special Instructions to Filing Officer:				
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COVER LETTER

Name of Corporation **Mocument Number: K02868 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: **William T. Link, Jr.**
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: William T. Link, Jr.
Please return all correspondence concerning this matter to the following: William T. Link, Jr.
William T. Link, Jr.
·
Name of Contact Person
Reed & Mawhinney, P.L.
Firm/Company
1611 Harden Blvd.
Address
Lakeland, FL 33803
City/State and Zip Code
will@polklawyer.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
William T. Link, Jr863687-1771
Name of Contact Person Area Code & Daytime Telephone

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

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

statement of cha	nnge is submitted for a corporation organi	
		red agent, or both, in the State of Florida.
1. The name of	the corporation: American Services	s, Inc.
2. The principal	office address: 4938 Pleasant Holl	ow Trail, Lakeland, FL 33811
3. The mailing a	address (if different): P.O. Box 5085	Lakeland, FL 33807
	44/47/4007	1/0000
4. Date of incor	poration/qualification: 11/17/1987	Document number: K02868
	i street address of the current registered ag rtment of State: (If resigned, enter resigned	
	Edward R. Harrison	
	4938 Pleasant Hollow Trail	
	Lakeland, FL 33811	÷ S
6. The name and (if changed):	d street address of the new registered agen	t (if changed) and /or registered office
	Reed & Mawhinney, P.L.	
	1611 Harden Blvd.	<u>ي</u>
	Lakeland, FL 33803	acceptable
The street addre	ess of its registered office and the street a be identical.	address of the business office of its registered agent,
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.
Card	/ / market	Edward R. Harrison, President
- "	re of an officer or director	Printed or typed name and title
I further agrée : performance of	the appointment as registered agent and to comply with the provisions of all statumy duties, and Fam familiar with and act is document is being filed merely to reflet that the carporation has been notified in	agree to act in this capacity. tes relative to the proper and complete ecept the obligation of my position as registered ct a change in the registered office address, I writing of this change.
		September 15, 2014
(Sig	nature of Begistered Agent	Date
If signing on be	half of an entity:	
Arle	M. Reed Manage	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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