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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: BUDGET OFFICE INTERIORS INC
Name of Corporation
DOCUMENT NUMBER: L6/505
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:
JAMES E LINKENAUGER Name of Contact Person BUDGET OFFICE INTERIORS INC Firm/Company 3030 POWERS AVENUE STE 101 Address JACKSONYILLE, FL 32207 City/State and Zip Code
BUDGET OFFICE INTERIORS INC
3030 POWERS AVENUE STE 101
TACKSONVILLE, FL 32207 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Area Code & Davtime Telephone Number
grame of Confact reison Area Code & Daytine 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 (04/13)

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: BUDGET OFFICE INTERIORS INC
2. The principal office address: 3030 POWERS Are, STE 101
JACKSUNVILLE, FL 37207
3. The mailing address (if different):
4. Date of incorporation/qualification: 7/12/1999 Document number: 401505
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)
WALTER S. MillsAps
2650 LONG BOAT COMET South
PONTA VEDRA BEACH, FL 32082 The name and street address of the name requisionard and for requisionard office.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DENNIS SCHUTT 3 PAGE
2700 UNIVESITY BIND W. Bldg. &
JACKSONVILLE 32217
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 AMES E. LINKENAUGE Printed or typed name and title
Signature of an officer or director Thereby accept the appointment as registered agent and agree to act in this capacity. I fifther 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.
Work 6, 2020
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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