

L25577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RA address
Change

06/21/13--01007--019 **35.00

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2013 JUN 21 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOR
6/25/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pro Clean Building Maintenance, Inc.
Name of Corporation

DOCUMENT NUMBER: L25577

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:

John Ford, Controller

Name of Contact Person

Pro Clean Building Maintenance, Inc.

Firm/Company

380 Northlake Blvd., Suite #1000

Address

Altamonte Springs, FL 32701-5260

City/State and Zip Code

John@TeamProClean.com

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

For further information concerning this matter, please call:

John Ford

Name of Contact Person

at (407) 478-5998

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

**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: Pro Clean Building Maintenance, Inc.
2. The principal office address: 380 Northlake Blvd., Suite #1000
Altamonte Springs, FL 32701-5260
3. The mailing address (if different): same as principal office address
4. Date of incorporation/qualification: 11/14/89 Document number: L25577

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)

Donald Zerivitz

442 S. Northlake Blvd, Suite#1024

Altamonte Springs, FL 32701

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

Donald Zerivitz

380 Northlake Blvd, Suite #1000

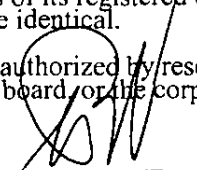
P.O. Box NOT acceptable

Altamonte Springs, FL 32701

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

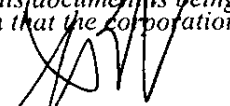
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Donald Zerivitz, CEO/President

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

6/17/13

Date

If signing on behalf of an entity:

Donald Zerivitz

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