

L82729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

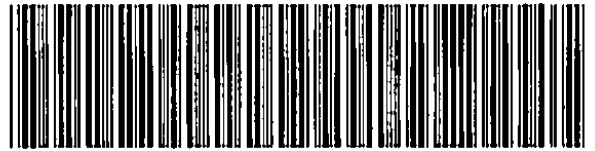
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Walker Design & Construction Co.
Name of Corporation

DOCUMENT NUMBER: L82729

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:

Lindsay Graham
Name of Contact Person

Walker Design & Construction Co.
Firm/Company

7209 Fashion St Blvd
Address

Saginaw, MI 48603
City/State and Zip Code

Lindsay@WalkerDC.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lindsay Graham at (987) 921-3030
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: WALKER DESIGN & CONSTRUCTION CO.
2. The principal office address: 2723 PINELAND AVE
WEST PALM BEACH, FL 33407
3. The mailing address (if different): 3391 FASHION SQUARE SAGINAW MI 48603
4. Date of incorporation/qualification: 6/25/90 Document number: 182729
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)
LEE WALKER
1060 HOLLAND DR. SUITE B
BUCKLETON, FL 33487

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

PATRICK GRAHAM
2723 PINELAND AVE
P.O. Box NOT acceptable
WEST PALM BEACH, FL 33407

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.

Wendy Graham
Signature of an officer or director

Wendy Graham Secretary
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.

Patrick Graham
Signature of Registered Agent

9/15/2020
Date

If signing on behalf of an entity:

Patrick Graham
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