## 1130230

| (Re                                     | questor's Name)   |             |
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| (Cit                                    | y/State/Zip/Phon  | e #)        |
| PICK-UP                                 | ☐ WAIT            | MAIL        |
| (Bu                                     | siness Entity Nar | me)         |
| (Do                                     | cument Number)    |             |
| Certified Copies                        | _ Certificate:    | s of Status |
| Special Instructions to Filing Officer: |                   |             |
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## **COVER LETTER**

| Division of Corporations  |  |  |  |
|---|--|--|--|
| SUBJECT: Plantation Cocline & HEATING, INC. Name of Corporation                               |  |  |  |
| DOCUMENT NUMBER: M30830   |  |  |  |
| 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:                     |  |  |  |
| Joseph D Swithlisk;<br>Name of Contact Person   |  |  |  |
| PlANTATION COOLING & HEATING, INC   |  |  |  |
| 4320 Peters Rd  |  |  |  |
| PLANTATION, FL 33317 City/State and Zip Code  |  |  |  |
| E-mail address: (to be used for future annual report notification)                            |  |  |  |
| For further information concerning this matter, please call:                                  |  |  |  |
| Voc. Swith SKi at (954) 583-2665  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

TO:

Amendment Section

## \* 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  |
|---|
| in order to change its registered office or registered agent, or both, in the State of Florida.   |
| 1. The name of the corporation: Plantation Cooling & HEATING IDC  |
| 2. The principal office address: 4320 feters Rd   |
| PANTATION F/ 33317  |
| 3. The mailing address (if different): 5AMC   |
| 4. Date of incorporation/qualification: 4/22/1986 Document number: M35830   |
| 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)  |
| Joe SwiTalski   |
| 7451 NW 13 CT   |
| PLANTATION, F1 33313  |
| 6. The name and street address of the new registered agent (if changed) and /or registered office.  (if changed):   |
| Joe SwiTA/ski   |
| 4320 Peters Rd * Fig 3  |
| Plantation, Fl 33317  |
| 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.   |
| Joseph Description Joseph Description Talski  |
| Thereby 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:  |
| Joseph D Switalski<br>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 (03/12)

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