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SECRETARY OF STATE
ALLAHASSEE, FLORID

R.A. Charge C.COULLIETTE

M49 05 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations FIRST COAST CONTRACTORS FOR CHANGE INC. (Name of Corporation) DOCUMENT NUMBER: NO900001197 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 Parol (Name of Contact Person) COAST CONTBACTORS FOR CHANGE INC. Jacksonville, Florice For further information concerning this matter, please call: Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address: Street Address: Amendment Section** Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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 (1
1. The name of the corporation: FIBST COAST CONTRACTORS FOR CHANGE IN 2. The principal office address: 1437 Delmar Store t Sock son ville, Florida 32205
3. The mailing address (if different): \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
4. Date of incorporation/qualification: 02/05/2009 Document number: 40900001197
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)
Saleem Bilal 1727 Helena Street
Jacksunville, Florida 3828 ZE &
6. The name and street address of the new registered agent (if changed) and /or registered office AHRE ARY OSE DEMONSTRATE TO THE TOTAL AND
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 difficer or director) 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) (Signature of Registered Agent) (Date)
Joseph Purch

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)