N/60000 11007

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |

Office Use Only

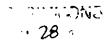


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SECRETARY OF STATE
ALLAHASSES BLODINA



COVER LETTER

| ΓO: Amendment Section Division of Corporations | |
|--|-----------|
| Fuller-Sandrin Inc | |
| SUBJECT: Fuller-Sandrin, Inc. Name of Corporation | |
| DOCUMENT NUMBER: N16000011007 | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing | g. |
| Please return all correspondence concerning this matter to the following: | |
| Lindsey Sandrin | |
| Name of Contact Person | |
| | |
| Firm/Company | |
| 216 E Vanderbilt St | |
| Address | |
| Orlando, FL 32804 | |
| City/State and Zip Code | |
| linds.sandrin@gmail.com | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Lindsey Sandrin Name of Contact Person Area Code & Daytime Telephor | |
| Name of Contact Person Area Code & Daytime Telephor | ne Number |
| Enclosed is a \$35.00 check made payable to the Department of State. | |
| Mailing Address: Amendment Section Street Address: Amendment Section | |

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

Clifton Building 2661 Executive Center Circle

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rockange its registered office or registered agent, or both, in the State of Florida. |
|---------------------------------------|---|
| | the corporation: Fuller-Sandrin, Inc. |
| 2. The principal | office address: 216 E Vanderbilt St, Orlando, FL 32804 |
| 3. The mailing a | ddress (if different): |
| 4. Date of incorp | poration/qualification: 11/14/2016 Document number: N16000011007 |
| | I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned) |
| | United States Corporation Agents, Inc. |
| | 13302 Winding Oaks Blvd, Suite A 🔀 🙃 |
| | Tampa, FL 33612 |
| 6. The name and (if changed): | Tampa, FL 33612 I street address of the new registered agent (if changed) and /or registered office. |
| | Lindsey Sandrin 물리 >> |
| | 216 E Vanderbilt |
| | P.O. Box NOT acceptable Orlando, FL 32804 |
| | ess of its registered office and the street address of the business office of its registered agent, be identical. as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change. |
| Ludre | Lindsey Sandrin, Director |
| -l furthèr agrée ; -verformance of | the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change. |
| Lindrie | Sand 1/10/2019 |
| If signing on be | half of an entity: |
| T | yped 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 * * *