## N190000 12680

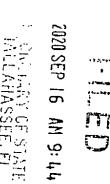
(Re	questor's Name)	-	
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PICK-UP	☐ WAIT	MAIL	
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: Association of Renovation Consultants	;	
Name of Corporation		
DOCUMENT NUMBER: N19000012680		
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
William Billings		
Name of Contact Person	<del></del>	
Association of Renovation Consultants		
Firm/Company	<del></del>	
2753 Vista Pkwy J12 2nd Floor		
Address		
West Palm Beach FL 33411		
City/State and Zip Code		
Bill@billingshomeinspection		
E-mail address: (to be used for future annua	report notification)	
For further information concerning this matter, p	please call:	
Paul Lesieur	at (612 ) 788 5584	
Name of Contact Person	at (612 ) 788 5584  Area Code & Daytime Telephone 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	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

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CR2E045 (04/13)

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, ange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.	this	
	the corporation: Association of Renovation Consultants		
2. The principa	office address: 2753 Vista Pkwy J12 2nd Floor, West Palm Beach FL 33411		
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 12/6/2019 Document number: N19000012680		_ 
5. The name an Florida Depa	d street address of the current registered agent and registered office on file with the ritment of State: (If resigned, enter resigned)		
	CANTELLI, STEPHEN C	.,	2(
	28229 CR 33LOT W38LEESBURG, FL 34748		)20 SI
		LAHASSI	타
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	111	6 AM
	William Billings	で で	<u>.</u>
	2753 Vista Pkwy J12 2nd F1	THE STATE OF	ţ-
	P.O. Box NOT acceptable West Palm Beach FL 33411		
The street addr	ess of its registered office and the street address of the business office of its register I be identical.	red agent,	,
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer s he board, or the corporation has been notified in writing of the change.	<b>:0</b>	
- July	to of an other of dispetor	Fr	25°
l hereby accept I further agree of my duties, an document is bei corporation has	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 pend I am familiar with and accept the obligation of my position as registered agent mg filed merely to reflect a change in the registered office address, I hereby confits been notified in writing of this change.	erforman Or, if th rm that th	06 its 'E
William	Billion 9/9/2020 penture of Registered Agents Date		
If signing on b	chalf of an entity:		
	Typed or Printed Name		
	A A A TOTAL TOTAL A CAR OF A A		

\* \* \* 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 (04/13)