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K. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Southeast Stucco, Inc.

Name of Corporation

DOCUMENT NUMBER. P00000008726

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:

**Edward Eady** 

Name of Contact Person

Southeast Stucco, Inc.

Firm/Company

3114 Alt 19, Suite B

Address

Palm Harbor, Florida 34683

City/State and Zip Code

southeaststucco@verizon.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward Eady

.,727

789-4080

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

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

1. The name of the corporation: Southeast Stucco, Inc. 2. The principal office address: 3114 Alt 19, Suite B, Palm Harbor, Florida 34683 3. The mailing address (if different):  4. Date of incorporation/qualification: 01/25/2000 Document number: P00000008726 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)  Michael E. Dris, Esq.  29 N. Pinellas Ave.  Tarpon Springs, Florida 34689 6. The name and street address of the new registered agent (if changed) and /or registered office of (if changed):  Edward Eady  3114 Alt 19, Suite B  PO Box NOT acceptable  Palm Harbor, Florida 34683  The street address of its registered office and the street address of the business office of its registered agent, as changed will be identified.  Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board of the change.  Edward Eady  Interest progress of the provisions of all statutes relative to the proper and complete performance of my dulies, 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 address. I hereby confirm that the comporation has been notified in writing of this change.  September 11, 2015  Supanum of Registered Agent  September 11, 2015  Date			gistered agent, or both, in the State of	TOOMU.
3. The mailing address (if different):  4. Date of incorporation/qualification:  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)  Michael E. Dris, Esq.  29 N. Pinellas Ave.  Tarpon Springs, Florida 34689  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Edward Eady  3114 Alt 19, Suite B  FO Box NOT acceptable  Palm Harbor, Florida 34683  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 of the corporation has been notified in writing of the change.  Edward Eady  Signatured at office in the provisions of all statutes relative to the proper and complete performance of my dulties, 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 gorphoration has been notified in writing of this change.  September 11, 2015  Signature of Registery Agent	1. The name of	the corporation: 300th 603t Otdo	te B. Palm Harbor, Florida	34683
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		11.1,	September 11, 2015	
If signing on behalf of an entity:	Sig	nature of Registered Agent	Date	
	If signing on be	half of an entity:		
	<u></u>	yped or Printed Name		

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