

P00000051757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

(Business Entity Name)

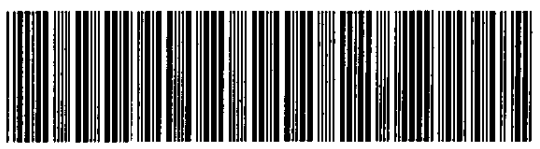
(Document Number)

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TALLAHASSEE, FLORIDA

RA  
Change

Signature

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Diversified Home Services + Construction, Inc.  
Name of Corporation

DOCUMENT NUMBER: P00000051757

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:

STEVEN L. CASH  
Name of Contact Person

Diversified Home Services + Construction, Inc.  
Firm/Company

6920 Waycross Ave.  
Address

Tampa, FL 33619  
City/State and Zip Code

DHS9181@verizon.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVEN L. CASH at (813) 376-8200  
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**

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DIVERSIFIED HOME SERVICES + CONSTRUCTION, INC.

2. The principal office address: 6920 WAYCROSS AVE  
TAMPA, FL 33619

3. The mailing address (if different): N/A

4. Date of incorporation/qualification: MAY 26, 2000 Document number: P00000051757

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)

STEVEN L. CASH  
12157 W. LINEBAUGH AVE. #247  
TAMPA, FL 33626

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

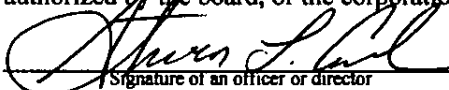
6920 WAYCROSS AVE.  
P.O. Box NOT acceptable  
TAMPA, FL 33619

2009 OCT 30 AM 2:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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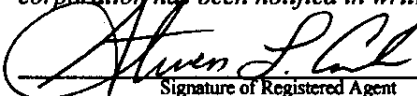
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 officer or director

STEVEN L. CASH PRESIDENT  
Printed or typed name and title

I hereby 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

10-28-09  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\*\*\* 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)