Po/0006683

(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:		,
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

SECOSTANA OF STATE

Allery to

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJI	ECT: EXTERIOR INNOVATIONS, INC. (Name of Corporation)			
DOCU	MENT NUMBER: P01000026683			
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	LEONARD TRINCA (Name of Contact Person)			
(Firm/Company)				
802 A1A BEACH BLVD (Address)				
	ST. AUGUSTINE, FL 32080 (City/State and Zip Code)			
For further information concerning this matter, please call:				
LEO	NARD TRINCA at (904) 461-3539 (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

statement of change is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.
1. The name of the corporation: EXTERIOR IN	INOVATIONS, INC.
2. The principal office address: 802 A1A BEA0	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 03/12/20	Document number: P01000026683
5. The name and street address of the current reg Florida Department of State:	istered agent and registered office on file with the
LEONARD TRINCA	
7 F STREET	TALL TALL
ST. AUGUSTINE, FL	32080 AHAA
6. The name and street address of the new register (if changed):	32080 SECRETARY OF PHIL: 39 Pered agent (if changed) and /or registered office FLORID
LEONARD TRINCA	ORAL 33
802 A1A BEACH BLV	<u>√D</u> →
ST. AUGUSTINE, FL	•
The street address of its registered office and thas changed will be identical.	ne street address of the business office of its registered agent,
Such change was authorized by resolution duly authorized by the board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
Renea trunco (Signature of an officer or director)	RENEE TRINCA, President (Printed or typed name and title)
	agent and agree to act in this capacity. f all statutes relative to the proper and complete performance t the obligation of my position as registered agent. Or, if this nge in the registered office address, I hereby confirm that the change.
Leona & Truck	LEONARD TRINCA, Registered Agent
If signing on behalf of an entity:	(Date)
(Typed or Printed Name)	_
* * * FIL	JNG 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)