PD1000073285

(Re	questor's Name)				
(Address)					
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(Cit	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
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Certified Copies	_ Certificates	s or Status			
Special Instructions to	Filing Officer:				
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10 OCT 27 PH I: L2
SECRETANT OF STATE

COVER LETTER

TO:	D: Amendment Section Division of Corporations						
SUBJE	ECT:	Domestic D	esigns Constr	uction, Inc.	<u> </u>		
			· · · · · · · · · · · · · · · · · · ·				
DOCU	MENT NU	MBER:	P010000	73285			
The en	closed State	ment of Change of Regi	stered Office/Agen	t and fee are submi	tted for filing.		
Please	return all co	rrespondence concernin	g this matter to the	following:			
	•		Cynthia A. Cro	ow			
			Name of Contact Po	erson			
		Domesti	ic Designs Cons	truction Inc			
		Domose	Firm/Company				
		4:	38 N. Fletcher A	venue			
	•		Address				
•							
		Fernar	dina Beach, Flo	rida 32034			
			City/State and Zip	Code			
		С	crow@bellsouth	.net			
	_	E-mail address: (to b			fication)		
For fur	ther informa	ation concerning this ma	tter, please call:				
		Cynthia Crow	at (904	753-1440		
	Nar	ne of Contact Person	at (Area Code & Dayti	me Telephone Number		
Enclose	ed is a \$35.0	00 check made payable t	o the Department o	f State.			
		Mailing Address: Amendment Sect	ion	Street Address	i. ection		
		Division of Corp		Division of Co			
		P.O. Box 6327		Clifton Buildin	ng		
		Tallahassee, FL	32314	2661 Executiv Tallahassee, F	re Center Circle L 32301		

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS $\ _{\bullet}$

statement of ch	ange is submitted for a cor	poration organize	607.1508, or 617.1508, Flo d under the laws of the Stat	te of Florida		
	_		d agent, or both, in the Stat	e of Flo r ida.		
	the corporation: Domes					
2. The principal	office address: 438 N. F	letcher Avenu	<u>e</u>			
Fernandir	na Beach, Florida 320	34				
3. The mailing a	address (if different): SAN	ИE				
4. Date of incor	poration/qualification:	7/25/01	Document number:	P01000073285		
	d street address of the current of State: (If resigner	~ ~	nt and registered office on f	ile with the		
	David H. McQuaig (Resigned)				
	4745 Sutton Park Court, Suite 103					
	Jacksonville, Florida	32224				
6. The name and (if changed):	d street address of the new	registered agent (if changed) and /or register	ed office A SECULE		
	Cynthia A. Crow			- ASS		
	438 N. Fletcher Ave			Hop H		
P.O. Box NOT acceptable						
	Fernandina Beach,	Florida 32034		<u></u>		
The street addr as changed will	ess of its registered office l be identical.	and the street ad	dress of the business office	e of its registered agent,		
Such change wauthorized by t	as authorized by resolution he board, or the corporation	on duly adopted b on has been notif	y its board of directors or ied in writing of the chang	by an officer so e.		
Signati	tre of an officer or director		Carlton C. Boyd, Printed or typed nam	Vice President		
I hereby accept I further agree of my duties, an document is be corporation ha	t the appointment as regis to comply with the provis nd I am familiar with and ing filed merely to reflect s been notified in writing	tered agent and a ions of all statute accept the obliga a change in the r of this change.	agree to act in this capacit is relative to the proper an ition of my position as reg registered office address, I	y. d complete performance istered agent. Or, if this hereby confirm that the		
	gnature of Registered Agent		10/25/	10		
/	·		Date			
it signing on be	ehalf of an entity:					
	Cynthia A. Crow Typed or Printed Name					

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