## P0300001990

| (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:  Parlant Holling  Fill Locurum H HS  It corne in 4/1/64 |  |  |  |  |



RA RO Chs



600064962486

02/02/06--01009--02: \*\*70.00

OFFEB-2 AMIO OF

## **COVER LETTER**

SUBJECT: B & S Cement Landscape Curbing & Decorative Texturing, Inc. (Name of Corporation) DOCUMENT NUMBER: P03000007990 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: Lauren Kohl-Helbig (Name of Contact Person) Gibson, Kohl-Helbig & Wolff P.L. (Firm/Company) 1800 Second Street, Ste. 901 (Address) Sarasota, FL 34236 (City/State and Zip Code) For further information concerning this matter, please call: 941 365-1166 (Area Code & Daytime Telephone Number) Lauren Kohl-Helbig (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

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

| statement of cha                   | ange is submitted for a corporation o  | $7.0502$ , $60^{\circ}$ , $1508$ , or $617.1508$ , Florida .<br>organized under the laws of the State of $_{\perp}$<br>egistered agent, or both, in the State of I   | Florida   |
|------------------------------------|--|--|---|
| 1. The name of                     | the corporation: B & S Cement Land   | scape Curbing & Decorative Texturing,  | Inc.  |
| 2. The principal                   | office address: 3764 St. Charles Cir   | cle  |   |
|                                    | Sarasota, FL 3423  | 3  |   |
| 3. The mailing a                   | address (if different):  |  |   |
| 4. Date of incorp                  | poration/qualification: 01/22/2003   | Document number: P03000  | 007990  |
|                                    | d street address of the current register rtment of State:  | red agent and registered office on file wi   | ith the   |
|                                    | Tom Bunting  |  | - PEG TE  |
|                                    | 3764 St. Charles Circle  |  | - 影-2   |
|                                    | Sarasota, FL 34233   |  | SEE   |
| 6. The name and (if changed):      | d street address of the new registered   | agent (if changed) and /or registered off  | FILED MOIOS   |
|                                    | Brad Sepper  |  |   |
|                                    | Clover Lane  | 3725 Ferguson  | Street  |
|                                    | (PO. Box NOT accept Sarasota, FL 34233   | otable)  |   |
|                                    |  |  | <del></del>   |
| The street addre as changed will   | ess of its registered office and the st<br>be identical.   | creet address of the business office of it   | ts registered agent,  |
| Such change wa<br>authorized by th | as authorized by resolution duly add<br>ne board, or the corporation has bee   | opted by its board of directors or by an notified in writing of the change.  | officer so  |
| Tom                                | Sent   | Tom Bunting, President   | 6.HaV   |
|                                    | the appointment as registered agen<br>to comply with the provisions of all<br>ad I am familiar with and accept the<br>ng filed merely to reflect a change is<br>been notified in writing of this cha | (Printed of typed name and agree to act in this capacity, statutes relative to the proper and controlled to the proper and controlled to the proper and controlled to the registere of the registered office address, I herelange. | nplete performance<br>d agent. Or, if this<br>by confirm that the |
| 4                                  |  | 1/24/0<br>(Date)   | 6   |
| rsig                               | gnatup of Registered Agent)  | (Date)   |   |
| If signing on bel                  | half of an entity:   |  |   |
| Brace                              | Vped or Printe Name)   |  |   |

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