

P030000037165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

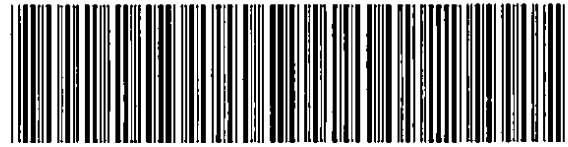
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DIVISION OF CORPORATIONS  
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R. HUNT

12/01/23

# COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ADVANCED DATA CABLEING & CONSULTING, INC.  
Name of Corporation

DOCUMENT NUMBER: PO3000037165

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:

WILLIAM BUTLER  
Name of Contact Person

ADCC, INC.  
Firm/Company

8777 SW 103RD CIRCLE  
Address

Ocala, FL 34481  
City/State and Zip Code

DBUTLER@ADCCINC.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM BUTLER at 754, 254-9676  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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**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: ADVANCED DATA CABLES & CONSULTING, INC  
2. The principal office address: 8777 SW 103<sup>RD</sup> CIRCLE Ocala, FLORIDA 34481

3. The mailing address (if different): SAME  
4. Date of incorporation/qualification: 03-27-2003 Document number: P03000037165

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)

JAMES B. LYON, ESQUIRE  
3300 UNIVERSITY DRIVE SUITE 802  
CORAL SPRINGS, FL 33065

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

WILLIAM D. BUTLER  
8777 SW 103<sup>RD</sup> CIRCLE  
P.O. Box NOT acceptable  
OCALA, FLORIDA 34481

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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]  
Signature of an officer or director

WILLIAM D. BUTLER, 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]  
Signature of Registered Agent

NOVEMBER 29, 2023  
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 (04/13)