

P03000060897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

X00789, 00611, 00671

DR
7/18/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LEVEL 10 CONTRACTORS, INC.
Name of Corporation

DOCUMENT NUMBER: PD3000060897

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:

PAUL SCHWEMMER
Name of Contact Person

LEVEL 10 CONTRACTORS, INC.
Firm/Company

727 BEVILLE ROAD
Address

SOUTH DAYTONA FL 32119
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL SCHWEMMER at (386) 451-6600
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2013

Paul Schwemmer
Level 10 Contractors, Inc.
727 Beville Road
South Daytona, FL 32119

SUBJECT: LEVEL 10 CONTRACTORS, INC.
Ref. Number: P03000060897

We have received your document for LEVEL 10 CONTRACTORS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 813A00016789

RECEIVED
13 JUL 18 AM 8:18
DIVISION OF CORPORATIONS
STATE OF FLORIDA

**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: LEVEL 10 CONTRACTORS, INC.
2. The principal office address: 727 BEVILLE ROAD, SOUTH DAYTONA, FL 32119
3. The mailing address (if different): SAA
4. Date of incorporation/qualification: 5/27/2003 Document number: PO3000060897

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)

RONALD F ANDERSON
400 S PALMETTO AVENUE
DAYTONA BEACH, FL 32114

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

PAUL SCHWEMMER
727 BEVILLE ROAD
SOUTH DAYTONA, FL 32119

P.O. Box NOT acceptable

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

PAUL SCHWEMMER, PRES.
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

JUL 15 2013
Date

If signing on behalf of an entity:

PAUL SCHWEMMER
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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE