## P03000107206

(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ry/State/Zip/Phone	<del>;</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



200249087642

06/21/13--01007--013 \*\*35.00

proposition.



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Mohvey Aluminum & Construction, INC.  Name of Corporation
DOCUMENT NUMBER: PO3000/07206
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:
Name of Contact Person
Mothrey Aluminsum & Construction, INC Firm/Company
208 POINCIANA AUC. Address
Port ORANGE, PL. 32127 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (386) 492-7915  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section  Street Address: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

## 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 <u>FLORIDA</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Mothney Aluminum & Construction, INC.
2. The principal office address: 208 Poinciana Avenue - Port Orange, FL. 32127
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/30/2003 Document number: Po 3000107206
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)
Reid, K % CPA, INC (K. Reid CPA, Duc)
3890 Turtle Creek Dr Suite B
Port Orange, FL 32127
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
3890 Turtle Creek Dr Suite B = TO P.O. BOX NOT acceptable  Port Orange, FL. 30127 5
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.
Michael Mohney - 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 of Registered Agent Date
/ = :
If signing on behalf of an entity:  ANIEL S. Friebis
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 (03/12)