

PO3000112827

(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:

Office Use Only



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10/03/16--01007--010 **25.00

11/08/16--01011--003 **10.00

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R. WHITE

16 NOV -8 PM 12:30
STATIONER
TALLahassee, FL 32310



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 6, 2016

JOHN WISEMAN
8027 COOPER CREEK BLVD STE 110
UNIVERSITY PARK, FL 34201

SUBJECT: CORE CONSTRUCTION SERVICES, SOUTHEAST, INC.
Ref. Number: P03000112827

We have received your document for CORE CONSTRUCTION SERVICES, SOUTHEAST, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 016A00021536

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORE Construction Services, Southeast, INC.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Wiseman
Name of Person

CORE Construction Services, Southeast, INC
Firm/Company

8027 Cooper Creek Blvd Suite 110
Address

University Park, FL 34201
City/State and Zip Code

Tara.Moses@coreconstruction.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Wiseman at (941) 343-4300
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: COFE Construction Services Southeast INC
2. The principal office address: 8027 Cooper Creek Blvd
University Park, FL 34201
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/9/03 Document number: P03000112827

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)

Becker & Poliakoff, P.A.
1 East Broward Blvd suite 1800
Ft. Lauderdale, FL 33301

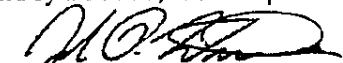
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Aaron J. Pruss
Hawson & Van Hellemont, P.C.
P.O. Box NOT acceptable

12800 UNIVERSITY DRIVE, SUITE 420 FORT MYERS, FL 33907

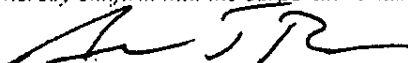
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

John Wiseman, as its 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

10-24-16
Date

If signing on behalf of an entity:

Aaron J. Pruss
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)

16 NOV -8 PM 12:30
RECEIVED
TALLAHASSEE OFFICE
DIVISION OF CORPORATIONS