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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	 -





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SECRETARY OF STATE
ALLIAMASSEE FLORIDA

APR 23 2019 T SCHROEDER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Joe Bennett Well Drilling & Irrigation Name of Corporation
Name of Corporation
DOCUMENT NUMBER:
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:
Joe Bennett
Name of Contact Person
Joe Bennett Well Drilling & Irrigation
Firm/Company
3650 Rodeo Acres Dr.
Address
Ormond Beach, Fl 32174
City/State and Zip Code
JBwellandirrigation@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joe Bennett386615-9166
Name of Contact Person at (
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

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.	-
1. The name of the	he corporation: Joe Bennett Well Drilling & Irrigation	
2. The principal	office address: 3650 Rodeo Acres Dr. Ormond Beach, Fl 32174	
3. The mailing ac	ldress (if different):	
4. Date of incorp	oration/qualification: 10/09/17 Document number:	
5. The name and	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)	
	Mathew Wilusz	٠
	3650 Rodeo Acres Dr. Ormond Beach, Fl 32174	
	Resigned Services Dr. Ormond Beden, 17 52 174 Print R	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered of the experiment of the street address of the new registered agent (if changed) and /or registered of the experiment of the street address of the new registered agent (if changed) and /or registered of the experiment of the street address of the new registered agent (if changed) and /or registered of the experiment of the street address of the new registered agent (if changed) and /or registered of the experiment of the street address of the new registered agent (if changed) and /or registered of the experiment of the street address of the new registered of the experiment of the street address of the new registered of the experiment of the street address of the experiment of the street address of the experiment of the experiment of the street address of the experiment of the street address of the experiment	
	N/A JOSEPH A BENNETT DE -	
	N/A JOSEPH A BENNETT BETT TO THE STATE OF TH	
The street address as changed will l	ss of its registered office and the street address of the business office of its registered ago	nt,
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.	
Signature	Joseph Bennett, president Printed or typed name and title	_
t further agree to performance of r agent. Or, if this	the appointment as registered agent and agree to act in this capacity, of comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered of document is being filed merely to reflect a change in the registered office address, I hat the corporation has been notified in writing of this change.	
Jour	d a famo 03/31/2019	_
If signing on beh	attire of Registered Agent Date	
To co Sept	A Bown etc.	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE