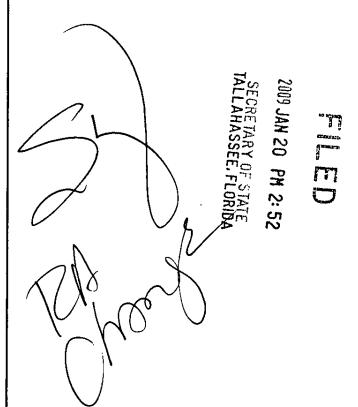
P03000147946

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	: #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
	Office Use Onl	y 9			



400141404674

01/20/09--01065--020 **35.00



COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJ	ECT: Lamber US Inc (Name	of Corporation)		
DOC	UMENT NUMBER: <u>P03000147946</u>			
The en	nclosed Statement of Change of Registered C	office/Agent and fee are submitted for filing.		
Please	e return all correspondence concerning this m	atter to the following:		
	Dion Cook (Name of	Contact Person)		
Lamber US Inc - DBA Allmax Pest Control (Firm/Company)				
	5925 Imperia	I Parkway, Suite 216A Address)		
	Mul	berry, FI 33860		
	(City/Sta	te and Zip Code)		
For fu	rther information concerning this matter, plea	ase call:		
···.	Dion Cook (Name of Contact Person)	at (<u>863</u>) 397 5544 (Area Code & Daytime Telephone Number)		
Enclos	sed is a \$35.00 check made payable to the De	epartment 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

	•	0502, 607.1508, or 617.1508, Florida S ganized under the laws of the State of \underline{F}	
•		ganized under the taws of the State of Fl gistered agent, or both, in the State of Fl	
1. The name of	the corporation: Lamber Us Inc		···
2. The principal	office address: 5925 Imperial Pa	arkway. Suite 216A.	
Mulberry,	Florida, 33860	· · · · · · · · · · · · · · · · · · ·	
3. The mailing a	address (if different): 2161 E Cour	nty Road, # 183	·
Lakeland	d, Florida, 33813		
4. Date of incor	poration/qualification: _12/01/2003_	Document number: p030001	47946
	I street address of the current register rtment of State: (If resigned, enter res	ed agent and registered office on file with igned)	h the
	Resigned		
			Zalis TAL TAL
			ZOO9 JAN SECRET
			TAR ASS
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered offic	
	Dion Cook		25. 52 25. 52
	5985 Imperial Parkway, Suite		>
	Mulberry, Florida, 33860	(AD)IC)	
as changed will	ess of its registered office and the stibe identical.	reet address of the business office of its	registered agent,
Such change was authorized by the	as authorized by resolution duly ado ne board, or the corporation has been	pted by its board of directors or by an an ontified in writing of the change.	officer so
<u> </u>	Coole.	Dion Cook (Printed or typed name and ti	
` •	the appointment as registered agen to comply with the provisions of all an familiar with and accept the ing filed merely to reflect a change is s been notified in writing of this cha	(Printed or typed name and ti t and agree to act in this capacity. statutes relative to the proper and com obligation of my position as registered on the registered office address, I hereb nge.	
λ .	Golo.	1 - 16 - 09	
(Si _l	gnature of Registered Agent)	(Date)	· · · · · · · · · · · · · · · · · · ·
If signing on be	half of an entity:		
	Typed or Printed Name)		

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