P03000/52628

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	·
(Cit	ty/State/Zip/Phone	e #)
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☐ PICK-UP	MAIT	MAIL
(Bu	sin e ss Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
		
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Special Instructions to	Filing Officer:	}
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: RIEHLE CONSTRUCTION INC. (Name of corporation)
DOCUMENT NUMBER: P03000152628
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:
JOHN TETERSON (Name of contact person)
TAXPRO (Firm/Company)
912 S. Palm BLVD SUITE E (Address)
NICEVILLE FL 32578 (City/state and zip code)
For further information concerning this matter, please call:
Journal Persons at (850) 729 1129 (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 FI 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee FI 32314

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

	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of FLOCIDA	
	to change its registered office or registered agent, or both, in the State of Florida.	_
1. The name of the	ne corporation: RIEHLE CONSTRUCTION, INC.	
	office address: 50 HARSTVEDT RO	
	SONTA ROSA BEACH FL 32459	
3. The mailing ac	dress (if different):	
4. Date of incorp	oration/qualification: 12 - 16 - 2003 Document number: P 0 3 000 1526	28
	street address of the current registered agent and registered office on file with the	
	THE CORPORATION SERVICE COMPANY E	
	1201 Hays STREET STREET	- WHEN
	TALLAHASSER FL 37301 FF 3	m
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	ס
	Taxpro	
	912 South Palm BLVD SUITE (E.O. BOX NOT acceptable)	
,	NICEVILLE FL 32578	
The street address as changed will l	s of its registered office and the street address of the business office of its registered ages the identical.	nt,
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.	
(Signatur	or an officer or director) FRANCINE RIEHLE SECRETHAN (Printed or typed name and title)	¥
I hereby accept t I further agree to of my duties, and document is beat corporation has	he appointment as registered agent and agree to act in this capacity, comply with the provisions of all statutes relative to the proper and complete performanger in the proper and complete performanger in the configuration of my position as registered agent. Or, if the proper is to reflect a change in the registered office address, I hereby confirm that the properties of this change.	nce this the
(Sign	tilian 10/18/2004 ature of Registered Agent) (Dgle)	_
If signing on beh	alf of an entity:	
JOHN F	TERSON	
(T)	ped or Printed Name)	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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