

PO3000153635

(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



100111190871

11/08/07--01030--014 **460.00

FILED
07 NOV -8 PM 2:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TS

6/13/07
08
6/13/07

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, 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 is: INSTALLATIONS PLUS OF CENTRAL FLORIDA INC
2. The principal office address: 1669 IMPERIAL PALM DRIVE
APOPKA FL 32712
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 12/17/2003 Document Number: P03000153635
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

FREDERICK POMMERING
1669 IMPERIAL PALM DRIVE
APOPKA FL 32712
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

FILED
97 NOV -8 PM 2:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ALL FLORIDA FIRM, INC
813 Deltona Boulevard, Suite A
Deltona, FL 32725

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.

Frederick Pommering President Date: 10/10/07
Signed by

Officer Name: FRDERICK POMMERING, Title: PRESIDENT

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.

Devin Newman Date: 9/18/07
Signed by Devin Newman as assistant secretary of All Florida Firm Inc, Registered Agent
Reference #1077198

10-17-07A09:58 3449

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, PO BOX 6327, TALLAHASSEE, FL 32314