

P04 0000 13 990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

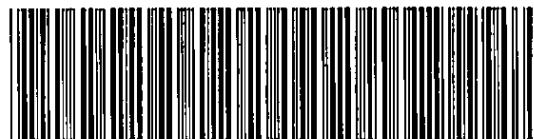
(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: **DRY WALL PRO INC**
Name of Corporation

DOCUMENT NUMBER: **P04000013990**

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:

WILLIE RODGERS SR

Name of Contact Person

DRY WALL PRO INC

Firm/Company

5404 GOLFCLUB PARKWAY

Address

ORLANDO, FL 32808

City/State and Zip Code

WILLIE@DRYWALLPROINC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIE RODGERS SR at **321 662-2776**
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, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

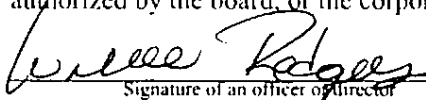
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

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: DRY WALL PRO INC
2. The principal office address: 5404 GOLFCLUB PARKWAY
ORLANDO, FL 32808
3. The mailing address (if different): 5404 GOLFCLUB PARKWAY
ORLANDO, FL 32808
4. Date of incorporation/qualification: 01/01/2009 Document number: P04000013990
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)
EVINGTON FRANCES
2710 BAYLEAF DRIVE
ORLANDO, FL 32837-6775
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
J STAR TAX & BOOKKEEPING SERVICE LLC
3337 ROGERS DRIVE
P.O. Box NOT acceptable
ORLANDO, FL 32805

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

WILLIE RODGERS SR

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

09/11/2019

Date

If signing on behalf of an entity:

JILLIAN JOHNSON

Typed or Printed Name

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