P0400003442C

(Requestor's Name)		
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 20, 2004

JULIE A. TERRY THAT PAINTING CO. CONSTRUCTION, INC. 12278 E. COLONIAL DR., STE. 600 ORLANDO, FL 32828

SUBJECT: THAT PAINTING CO. CONSTRUCTION, INC.

Ref. Number: P04000034420

We have received your document for THAT PAINTING CO. CONSTRUCTION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because I have not received the correct form since our initial conversation on July 6, 2004, I have no other choice but to return your correspondence with the correct form to be completed and returned.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 004A00045956

Irene Albritton Document Specialist OF JUL 29 PM 4: 30

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: THAT PAINTING CO. CONSTRUCTION, INC. (Name of corporation)
DOCUMENT NUMBER: POYOOOG34420
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:
Name of person)
THAT PAINTING CONSTRUCTION, INC. (Name of firm/company)
12278 E. COLONIAL DR., SUITE 600 (Address)
CRLANDO FL 32828 (City/state and zip code)
For further information concerning this matter, please call:
TULIE A. TERRY at (401) 213-2580 (Name of 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 409 E. Gaines Street Tallahassee, FL 32399

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 __ order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: 2. The principal office address: CRAND -3. The mailing address (if different): 4. Date of incorporation/qualification: 2020 204 Document number: Po40000 34420 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): 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. 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. If signing on behalf of an entity: (Typed or Printed Name) (Capacity)

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

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