

PO4000041490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

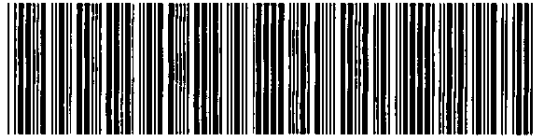
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 20 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 3 STARZ STUCCO, INC
(Name of Corporation)

DOCUMENT NUMBER: P04000041490

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

IVAN M. GAYDARZHI

(Name of Person)

3 STARZ STUCCO, INC

(Name of Firm/Company)

11135 PEERLESS LANE

(Address)

JACKSONVILLE, FLORIDA 32246

(City/State and Zip Code)

For further information concerning this matter, please call:

GALINA V. GAYDARZHI

(Name of Person)

at (904) 710-2589

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

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

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**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: 3 STARZ STUCCO, INC
2. The principal office address: 11135 PEERLESS LANE JACKSONVILLE, FLORIDA 32246
3. The mailing address (if different): THE SAME
4. Date of incorporation/qualification: 2004 Document number: P04000041499
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)

Resigned ALEKSANDR SCHUR

11135 PEERLESS LANE

JACKSONVILLE, FLORIDA 32246

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Changed

Mykhailo Golovatiuk

11135 PEERLESS LANE

P.O. Box NOT acceptable

JACKSONVILLE, FLORIDA 32246

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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]
Signature of an officer or director

IVAN M GAYDARZHI - PRESIDENT

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]
Signature of Registered Agent

08/25/2009
Date

If signing on behalf of an entity:

Typed or Printed Name

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