

PD40000584Q3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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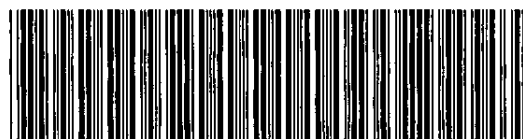
(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: ScandiClean Inc
Name of Corporation

DOCUMENT NUMBER: P4000058403

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:

Jorgen Hansen
Name of Contact Person

ScandiClean Inc
Firm/Company

4611 S University dr 149
Address

Davie FL 33328
City/State and Zip Code

hansen.jorgen@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorgen Hansen at (786) 252-5230
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Scand:Clean Inc
2. The principal office address: 4611 S University dr 149
Davie FL 33328
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 04/06/2004 Document number: P04000058403

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) _____

6130 SW 8th ST Plantation
FL 33317

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

Jorgen Hansen
4611 S University dr 149
Davie FL 33328

P.O. Box NOT acceptable

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.

Jorgen Hansen
Signature of an officer or director

Jorgen Hansen owner
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.

Jorgen Hansen
Signature of Registered Agent

7/29/15
Date

If signing on behalf of an entity:

Jorgen Hansen
Typed or Printed Name

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