

P04000111717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

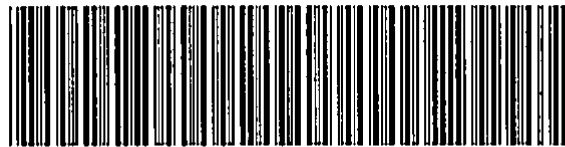
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

JQ 10/21/20

# COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Premier Surface Solutions Inc  
Name of Corporation

DOCUMENT NUMBER: P04000111717

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:

Greg Nichols  
Name of Contact Person

Premier Surface Solutions Inc  
Firm/Company

PO Box 13562  
Address

Tallahassee FL 32317  
City/State and Zip Code

info@surfacingteam.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Greg Nichols at ( 850 ) 509-3448  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Premier Surface Solutions Inc
2. The principal office address: 2850 Industrial Plaza Drive  
Tallahassee, FL 32301
3. The mailing address (if different): Po Box 13562 Tallahassee, FL 32317
4. Date of incorporation/qualification: 7/29/04 Document number: P0400011717
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)

Rodney E. Reams  
1621 Metropolitan Blvd. Suite 200  
Tallahassee, FL 32308

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

Rodney E. Reams  
2850 Industrial Plaza Drive  
P.O. Box NOT acceptable  
Tallahassee, FL 32301

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TALLAHASSEE, FL

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

Greg Nichols - 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

9/14/20  
Date

If signing on behalf of an entity:

Rodney E. Reams  
Typed or Printed Name

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

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