P05000141208

(R	equestor's Name)
(A	ddress)
(A	ddress)
	Sity/State/Zip/Phone #)
<u></u>	
L] PICK-UP	☐ WAIT ☐ MAIL
(B	dusiness Entity Name)
(D	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only



200274071602

06/29/15--01027--012 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Alan Black Construction, Inc.

Name of Corporation

DOCUMENT NUMBER:

P05000141208

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:

Alan Black

Name of Contact Person

Alan Black Construction, Inc.

Firm/Company

NEW

3600 NW 5th Terrace

Address

Boca Raton, FL 33431

City/State and Zip Code

alanblackconstruction@gmail.com

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

For further information concerning this matter, please call:

Alan Black

954

798-4880

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Alan Black Construction, Inc.
	office address: 3600 NW 5th Terrace
3. The mailing a	address (if different): Same
4. Date of incor	poration/qualification: 10/18/2005 Document number: P05000141208
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Alan Black
	6362 Brava Way
	Boca Raton, FL 33433
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Alan Black 3600 NW 5th Terrace
	3600 NW 5th Terrace
	P.O. Box NOT acceptable
	Boca Raton, FL 33431 See of its registered office and the street address of the business office of its registered occur.
The street address changed will	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
	lau Black Alan Black Printed or typed name and title Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete The proper and I am familiar with and accept the obligation of my position as registered To being filed merely to reflect a change in the registered office address, I That the corporation has been notified in writing of this change.
	ature of Registered Agent Date 15/15 15/
If signing on be	half of an entity:
Ty	/ped 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
CR2E045 (03/12)