P06 C666 11669

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Miller Commercial Development Name of Corporation		
DOCUMENT NUMBER: P06000011669		
The enclosed Statement of Change of Registered Off	ice/Agent and fee are submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Karina Miller		
Name of Contact Person		
Miller Commercial Development		
Firm/Company		
PO Box 6066		
Address		
Pensacola, FL 32503		
City/State and Zip Code		
kmpensacola@icloud.com		
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, please	e call:	
Karina Miller	at (850)7124772 Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depa	artment of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	ange is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	-
1. The name of the corporation: Miller Commercial Development			
2. The principal	office address: 6261 Technology Dri	ive, Pensacola FL 32505	_
			_
3. The mailing a	address (if different): same		
4. Date of incor	poration/qualification: 2006	Document number: P06000011669	
5. The name an Florida Depa	d street address of the current regist rtment of State: (If resigned, enter r	tered agent and registered office on file with the resigned)	
	Joseph R Miller (deceased)		
	6261 Technology Drive		
	Pensacola, FL 32505	2920	encies.
Pensacola, FL 32505 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Karina Miller		7 <i>2</i>
	6261 Techonology Drive	တ <u>ို</u> ့် တွဲ့ 	
		P.O. Box NOT acceptable)
	Pensacola, FL 32505		
		street address of the business office of its registered age	nt,
Such change wanthorized by	vas authorized by resolution duly a the board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.	
Muriel	ture of an officer or director	Printed or typed name and title	routary
I hereby accept further agree of my duties, a document is be corporation ha	of the appointment as registered age to comply with the provisions of a and I am familiar with and accept t eing filed merely to reflect a chang as been notified in writing of this c	gent and agree to act in this capacity. all statutes relative to the proper and complete performa the obligation of my position as registered agent. Or, if we in the registered office address, I hereby confirm that whange.	nce this the
Doe	e Vi	05/28/2020	
S	ignature of Registered Agent	Date	
If signing on b	behalf of an entity:		
Karina M Mille	er		

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

Typed or Printed Name