## P06000037401

(Requestor's Name)	_
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

'# \*\*. \*# Office Use Only



900267862039

01/12/15--01005--015 \*\*35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 14 2015 T. CARTER

## **COVER LETTER** .

TO: Amendment Section Division of Corporations
SUBJECT: HATE TO PAINT TUC.  Name of Corporation
DOCUMENT NUMBER: 206000 37401
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:
Name of Contact Person
HATE TO PAINT INC. Firm/Company
5236 Timucua Ciricle
ST Augustine FL. 32086  City/State and Zip Code
HATE TO DAWTING WYAHOO COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Paul Guernon at 964 219-2529  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

or blanch of blanch of blanch of blanch of blanch

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: HATE TO PAINT INC.
2. The principal office address: 5236 Timucua Circle ST Augustiwe FL 32086
3. The mailing address (if different): SAM E
4. Date of incorporation/qualification: 3/15/2006 Document number: P060000 37401
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)
Paul Gupanon
5236 Timucua Ciride 55 ASS
ST Analisting Pl. 32086
6. The name and street address of the new registered agent (if changed) and /or registered office  (if changed):  - Rechard HAρργ  - Rechard
RICHARD HAPPY 5
1165 3rd \$7. P.O. Box NOT acceptable
ST AUGUSTINE FL 32095
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 of an officer or director  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.
Richard Agent 08/01/2015
If signing on behalf of an entity:
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 CR2E045 (03/12)