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NOV 0 6 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Collier's Complete Trim, Inc.

Name of Corporation

DOCUMENT NUMBER: P06000050557

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:

Amey Collier

Name of Contact Person

Collier's Complete trim, Inc.

Firm/Company

4631 Hwy 40 W

Address

Yankeetown, FI 34498

City/State and Zip Code

ameymcollier@gmail.com

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

For further information concerning this matter, please call:

Amey Collier

,,239

249-1377

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 che	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida egistered agent, or both, in the State of Florida.	
1. The name of	the corporation: Collier's Comle	ete Trim, Inc.	
2. The principal	office address: 4631 Hwy 40 V	N	
	Yankeetown, F		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 4/2006	Document number: P0600050557	
	d street address of the current registertment of State: (If resigned, enter re	ered agent and registered office on file with the signed)	
	Amey Collier		
	25230 Busy Bee Dr.		
	Bonita Springs, FI 34135	5	
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered office	
	Amey Collier	ALLIA 8 (
	4631 Hwy 40 W	ETAIL STANKASS	<u> </u>
		NOT acceptable	
The street address changed will		treet address of the business office of its registered agent	_
Such change was authorized by the	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an officer so in notified in writing of the change.	
Signafe	a sille	Amey Collier VP/D Printed or typed name and title	
I further agree performance of	f my duties, and I am familiar with a	nt and agree to act in this capacity. statutes relative to the proper and complete and accept the obligation of my position as registered o reflect a change in the registered office address, I fied in writing of this change.	
Ance	(Ollow)	10/25/2018	
V	mature of Registered Agent	Date	
If signing on be	chalf of an entity:		
	yped or Printed Name		

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