

(Requestor's Name) (Address)	300245611093			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	03/15/1301004019 **35.00			
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	13 MAR 15 AH 9: 18 SECRETARY OF STALE TALLAHASSEE, FLORIDA			
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Finishing Touch Drywall Inc

Name of Corporation

DOCUMENT NUMBER. P06000060042

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:

Lita Young

Name of Contact Person

Finishing Touch Drywall Inc

Firm/Company

PO Box 9283

Address

Panama City Beach, FL 32417

City/State and Zip Code

billing@finishingtouchdrywall.com

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

For further information concerning this matter, please call:

Lita Young

.,850

867-9893

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	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of	Florida		_
1. The name of t	he corporation: Finishing Tou	ch Drywall Inc			
2. The principal	office address: 21414 Sunset	Ave, Panama City Beach, FL	_ 3241	3	
3. The mailing a	ddress (if different): 174 WaterC	Color Way Ste 103-429, Santa Ro	sa Bea	ıch, F	L 32459
4. Date of incorp	poration/qualification: April 27,	2006 Document number: P060	00060	042	
5. The name and		ered agent and registered office on file v			
	resigned		_		
6. The name and (if changed):	21414 Sunset Ave Panama City Beach, FL	ed agent (if changed) and /or registered of agent (if changed) are	SECRETARY OF STATE	13 MAR 15 AH 9: 18	destruction of the second of t
The street addre	ess of its registered office and the second the second second in the second sec	street address of the business office of	- its registe	ered a	gent,
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered age to comply with the provisions of an my duties, and I am familiar with	Lita C Young Vice Pres Printed or typed name and to and agree to act in this capacity. Il statutes relative to the proper and co and accept the obligation of my position to reflect a change in the registered offit ified in writing of this change. March 13, 2013 Date	sident inte	istered	— d
Ť	yped or Printed Name				

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