## P060000019724

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone #	<del>()</del>
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: RISE ABOVE GENERAL CONTRACTING, LUC.
DOCUMENT NUMBER: P06000079724
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:
DONNA BONOMO  Name of Contact Person  RISE ABOVE GENERAL CONTRACTING, INC.  Firm/Company  1765 LAKE WORTH RD. #343  Address  LAKE WORTH FL 33467  City/State and Zip Code
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
For further information concerning this matter, please call:    DONNA   BONOMO   at (561) 827.5765.   Solution
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

## 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: RISE ABOVE GENERAL CONTRACTING, INC
2. The principal office address: 7765 LAKE WORTH RD #343
LAKE WORTH, Ft. 33467
3. The mailing address (if different):
4. Date of incorporation/qualification: 3.29.07 Document number: Po6000079754
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)
DONNA A. REIDY
9835.16 LAKE WORTH ROAD, #329
LAKE WORTH, FL 334.67
6. The name and street address of the new registered agent (if changed) and /or registered office:    Donna A. Bonomo   2000   2
7765 LAKE WORTH ROAD, #343 P.O. Box NOT acceptable
LAKE WORTH, FL. 33467 5
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.
Donna Bonomo PRES, Signature of an officer or director  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 the document is being filed merely to reflect a change in the registered office address. I hereby confirm that the conformation has been notified in writing of this change.
DUKAC BOXONO 6-19-22 Signature of Registered Agent Date
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