Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)205-0380

Account Name : INCORPORATING SERVICES FL

Account Number : I20050000052

: (302)531-0855

Fax Number

; (866) 223-0765

REGISTERED AGENT CHANGE

LEFROIS BUILDERS SOUTH, INC.

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunhiz.org/scripts/efilcovr.exe

(((H07000128041 3)))

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

change is subm	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu atted for a corporation organized under the laws of the State of Florida	tes, this .		ent of n order
to change its re	gistered office or registered agent, or both, in the State of Florida.			
1. The name of	the corporation: LeFrois Builders South, Inc.			
2. The principa	l office address: P. O. Box 230, Henrietta, New York, 14467			
3. The mailing	address (if different):			
4. Date of incom	poration/qualification: 6-22-06 Document number: P080000846	68		
	d street address of the current registered agent and registered office on file with the runent of State;	•		
4	Richard R. LeFrois			
	3580 NE 31st Avenue	SE	0	
	Lighthouse Point, FL 33064	CRET	7 MAY	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	TARY OF	-9 PM	
	Christopher M. Fear, Esq.	_`v	င္ပ္	O
	One Lake Morton Drive	TATE PRINT		
	(P.O. Box or personal mailbox NOT acceptable)	:>		
	Lakeland, FL 33801			
The street addre changed will be	ess of its registered office and the street address of the business office of its reg c identical.	istered a	igent, e	is ·
Such change wa	as authorized by resolution duly adopted by its board of directors or by an office corporation has been notified in writing of the change.	er so au	thorize	d by
> -	FRIC TONGS 10	a		
<u> </u>	Steamure of an officer or director) (Printed of types Hamb a			
I hereby accept I further agree , duties, and I an being filed meri been notified in	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete familiar with and accept the obligation of my position as registered agent. Only to reflect a change in the registered office address, I hereby confirm that the writing of this change.	perform r, if this corpor	nance docum atlon l	of my ient is ias
	Cretian 5/7/07			
	(Signature of Registered Agent) (Dain)			
If signing on be	half of an entity:			
	(Typed or Printed Name) (Capacity)			

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