

PD60000149853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

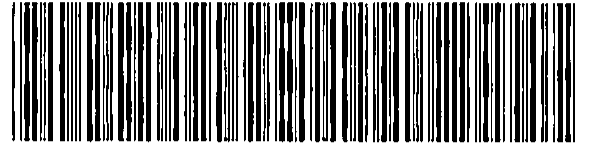
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 07 2019

ALBRITTON

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 3/6/2019

PRIORITY Routine

OUR REF.# (Order ID#) 726368

ORDER ENTITY
ORISKA CORP GENERAL CONTRACTING

PLEASE PERFORM THE FOLLOWING SERVICES:
ORISKA CORP GENERAL CONTRACTING (FL)

File the attached change of agent document

NOTES:
\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:
ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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: ORISKA CORP GENERAL CONTRACTING
2. The principal office address: 1310 Utica Street, Oriskany, NY 13424
3. The mailing address (if different): PO Box 855, Oriskany, NY 13424
4. Date of incorporation/qualification: 12/05/2006 Document number: P06000149853
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)

Antonio Faga, Esq.
7955 Airport Road, Suite 101
Naples, FL 34109

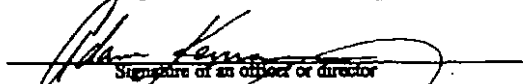
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporate Service Bureau Inc.
1540 Glenway Drive
P.O. Box NOT acceptable
Tallahassee, FL 32301

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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

Adam M. Kernan, President
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.


Signature of Registered Agent

02/28/2019
Date

If signing on behalf of an entity:

Scott J. Schuster
Typed or Printed Name

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