

P07000120995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

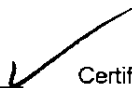
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MAIL

(Business Entity Name)

(Document Number)

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FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
09 AUG 13 AM 11:00

Roberts AUG 17 2009

Tallahassee, FL 32314

ACIR INC.

Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

To whom it may concern,

I am enclosing a check for \$43.75. Could you please send us a certified copy? I have enclosed an additional \$8.75 along with the \$35 fee. Thank you for your help.

Sincerely,

Rachel Burke

Rachel Burke

Office Manager

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: American Construction & Insurance Restoration, Inc.
Name of Corporation

DOCUMENT NUMBER: P07000120995

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:

Edward Phillips
Name of Contact Person

American Construction & Insurance Restoration, Inc.
Firm/Company

3008 NW 27th Terrace
Address

Boca Raton, FL 33434
City/State and Zip Code

ep12three@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heather Phillips at (561) 650-0439
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**

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: American Construction & Insurance Restoration, Inc.
2. The principal office address: 3008 NW 27th Terrace, Boca Raton, FL 33434
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/06/2007 Document number: P07000120995
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)

Edward Phillips

8811 Chunnel Terrace

Boca Raton, FL 33433

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

Edward Phillips

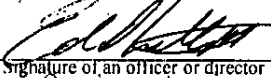
3008 NW 27th Terrace

P.O. Box NOT acceptable

Boca Raton, FL 33434

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

P/D

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

8/11/09
Date

If signing on behalf of an entity:

Edward Phillips
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

CR2E045 (8/05)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 AUG 13 AM 11:00