P07000125560

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nai	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
	,	

Office Use Only



600136724926

10/09/08--01025--020 **35.00

lo do

08 OCT -9 PH 2: 15

T. Roberts OCT 1 5 2008

COVER LETTER

	n of Corporations	•
SUBJECT:_A	RTISAN BUILDING SERVICES (Name of Corp.)	S INC pration)
DOCUMENT :	NUMBER: P07000125560	
The enclosed St	tatement of Change of Registered Office/Ap	gent and fee are submitted for filing.
Please return all	correspondence concerning this matter to	the following:
	JEANNETTE	NIELSON
	(Name of Contac	t Person)
	(Firm/Comp	any)
	100 2ND S	TREET
	(Address	
	WINTERGARDEN (City/State and 2	FLORIDA, 34787
For further info	rmation concerning this matter, please call:	• •
Tor further line	ination concerning and matter, please can.	•
	EANNETTE NIELSON (Name of Contact Person)	at (<u>407</u>) 7381642 (Area Code & Daytime Telephone Number)
1	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$3	35.00 check made payable to the Departme	nt of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301

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

Fursuant 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: ARTISAN BUILDING SERVICES INC ¥
2. The principal office address: 100 2ND STREET WINTERGARDEN FLORIDA 34787
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/30/2007 Document number: P07000125560
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)
JEANNETTE NIELSON
1107 GARDANNE COURT
KISSIMMEE FLORIDA 34759
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JEANNETTE NIELSON
100 2ND STREET
(P.O. Box NOT acceptable) WINTERGARDEN FLORIDA, 34787
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 van officer or diffective (Printed or typed name and title) JEANNETTE NIELSON (V.P.) (Printed or typed name and title)
Ihereby accept the appointment as registered agent and agree to act in this capacity. If 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.
LIANNES W VD. 03/08/08
If signing on behalf of an entity:
(Typed or Printed Name)

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