P01000121310

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly (Valle)
(Danish Allerhan)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
JUL 3 1 2023
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05/31/23- 01035--024 **35.00



COVER LETTER

Amendment Section

TO:

SUBJECT: SOUTH FLORIDA BUILDING SOLUTIONS, INC. Name of Corporation	
DOCUMENT NUMBER: P07000127310	
The enclosed Statement of Change of Registered Office/Agent and fee are su	bmitted for filing
Please return all correspondence concerning this matter to the following:	_
Bruce E. Loren, Esq.	
Name of Contact Person	
Loren & Kean Law	
Firm/Company	
7111 Fairway Drive, Suite 302	
Address	
Palm Beach Gardens, FL 33418	
City/State and Zip Code	
klibrizzi@sdcontracting.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Bruce E. Loren, Esq.

Name of Contact Person

___at (561 ____) 615-5701 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, 61, statement of change is submitted for a corporation of in order to change its registered office or r	7.0502, 607.1508, or 617.1508. Florida Statutes, this organized under the laws of the State of Florida
1. The name of the corporation: SOUTH FLORIDA	
2. The principal office address: 2610 Old Okeechober	e Rd., West Palm Beach, FL 33409
3. The mailing address (if different):	
4. Date of incorporation/qualification: 11/28/2017	Document number: P07000127310
5. The name and street address of the current register Florida Department of State: (If resigned, enter re-	red agent and registered office on tile with the
Daniel Fitzpatrick	
7003 S Indian River Dr	
Fort Pierce, FL 34982	
6. The name and street address of the new registered (if changed): Bruce E. Loren, Esq.	agent (if changed) and /or registered office
7111 Fairway Drive, Suite 302	
	O Boy NOI acceptable
Palm Beach Gardens, FL 33418	
The street address of its registered office and the stras changed will be identical.	reet address of the business office of its registered agent.
Such change was authorized by resolution duly ado authorized by the board, or the corporation has been	
_/// (Daniel Fitzpatrick, President
Signature of an officer or director	Printed or typed name and title
I helleby accept the appointment as registered agen. I further agree to comply with the provisions of all soft my duties, and the am familian with and accept the document is fleifly filed needly to reflect a change is corporation has been notified in writing of this char	statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this n the registered office address, I hereby confirm that the nge.
Signature Vi Registered Agent	5/17/2023
If signing on behalf of an entity:	Date
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 (04/13)