P08 0000 127 777

(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

Amendment Section

TO:

Division of Corporations			
SUBJECT: MONSTER CONSTRUCTION, INC. Name of Corporation			_
DOCUMENT NUMBER: P08000012777			_
The enclosed Statement of Change of Registered Of	fice/Agent and fe	e are submitted for	filing.
Please return all correspondence concerning this ma	tter to the followi	ng:	
Roger Buczek Name of Contact Person Monster Construction Inc. Firm/Company 917 N Dixie Highway Address Lake Worth FL 33460			2024 SEP 13 PH 4: 24 SECRETARY SECURE
City/State and Zip Code			
Aspen.monsterfl@gmail.com E-mail address: (to be used for future annual rep	oort notification))	- 77
For further information concerning this matter, pleas	se call:		
Aspen Buczek	at (_ 561) 243-7970	
Name of Contact Person	Area Co	de & Davtime Tel	ephone 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

statement of cha	inge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida S rganized under the laws of the State of $\frac{V}{2}$ rgistered agent, or both, in the State of F	lorida			
1. The name of t	the corporation: MONSTER CONSTI	RUCTION, INC.				
2. The principal LAKE WORTH	office address: 917 N DIXIE HIGHW	/AY				
3. The mailing a	ddress (if different);					
4. Date of incorp	Date of incorporation/qualification: 02/04/2008 Document number: P08000012777					
	I street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file wit signed)	th the			
	Michelle Buczek					
	4683 Lotus Way Boynton Beach FL 33436					
(if changed):	Aspen Buczek 917 N Dixie Highway Lake Worth FL P.0	agent (if changed) and /or registered off _ 33460 D. Box NOT acceptable reet address of the business office of its	3 PH W 24			
Such change wa authorized by the	is authorized by resolution duly add to board, or the corporation has bee	opted by its board of directors or by an on notified in writing of the change.	officer so			
	2	Roger Buczek , OD				
Lhereby accept Llurther agree i	the appointment as registered agen the appointment as registered agen to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this cha	Printed or typed name and titl at and agree to act in this capacity, statutes relative to the proper and com obligation of my position as registered in the registered office address, I hereb inge.	plete performance			
01.4		9/05/2024				
Sig	nature of Registered Agent	Date				
If signing on be	half of an entity:					
Aspen Buczek						
T	sped or Printed Name					

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl. 32314 CR2E045 (04/13)

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