P08000014111

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(F	Requestor's Name)
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Ţ.	City/State/Zip/Phone #)
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COVER LETTER

то:	Amendment Section Division of Corporations		
SUBJE	JECT: Southern Fabrications Name of Corporation	[nc.	
DOCU	UNIENT NUMBER: <u>P080001411 </u>		
The enc	nclosed Statement of Change of Registered Office/Agent and fee are	submitted for filing.	
Please r	e return all correspondence concerning this matter to the following:		
	David Huggins Name of Contact Person	<u>, </u>	
	Southern Fabrication	os Inc.	
	13587 77th Place		
	West Palm Beach, Francisco City/State and Zip Code	33412	
	E-mail address: (to be used for future annual repor	nail. Com	
For furt	irther information concerning this matter, please call:		
D	Name of Contact Person at (50) Area Code &	248 - 005 Daytime Telephone Number	
Enclose	sed is a \$35.00 check made payable to the Department of State.		
	Division of Corporations Division P.O. Box 6327 Clifton I	nent Section of Corporations	

Tallahassee, FL 32301

CR2E045 (03/12)

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
	change is submitted for a corporation organized under the laws of the State of
in o	rder to change its registered office or registered agent, or both, in the State of Florida.
1. The name	of the corporation: SOUTHERN Fabrications Inc.
2. The princi	pat office address: 13587 77th Pace N
	West talm Beach PC 33412
3. The mailir	ng address (if different):
4. Date of in	corporation/qualification:272008 Document number: P08000014111
	and street address of the current registered agent and registered office on file with the epartment of State: (If resigned, enter resigned)
	图 15 632 100th PIN
	WPB, F1 33412
6. The name (if change	and street address of the new registered agent (if changed) and /or registered office d):
1	13587 77th ACCON -
	P.O. Box NOT acceptable
i	25 E
T.	
as changed v	ldress of its registered office and the street address of the business office of its registered agent, will be identical.
Such change authorized b	was authorized by resolution duly adopted by its board of directors or by an officer so y the board, or the corporation has been notified in writing of the change.
sig	DAVIA HUGGINS Printed or typed name and title
l furthér agr performance agent. Orl i	ept the appointment as registered agent and agree to act in this capacity. ee to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as registered I this document is being filed merely to reflect a change in the registered office address, I rm that the corporation has been notified in writing of this change.
	Signature of Registered Agent 3 8 20 8 Date
If signing on	behalf of an entity:
	Typed or Printed Name
1	* * * FILING FEE: \$35.00 * * *
Ì	Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (03/12)