

POS 0000 26104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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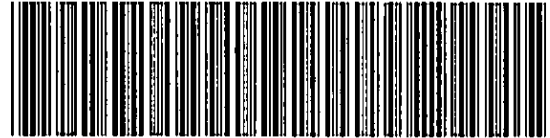
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Chr.st.al Construction Inc
Name of Corporation

DOCUMENT NUMBER: P08000026104

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:

Sandra Pridemore

Name of Contact Person

Sandra K Pridemore CPA PA

Firm/Company

209 Nassau Street S Ste 104

Address

Venice FL 34285

City/State and Zip Code

sandra.pridemorecpa@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Pridemore

Name of Contact Person

at (941) 488-5110

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

**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: Chr.st.al Construction Inc
2. The principal office address: 121 Triple Diamond Blvd Unit 9, Venice FL 34275
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/11/2008 Document number: P08000026104
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)

Kevin Matthew Miska CPA

100 Wallace Ave Ste 255

Sarasota FL 34237

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

Sandra K Pridemore CPA


209 Nassau St S Ste 104

P.O. Box NOT acceptable

Venice FL 34285


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

Chris Alexakis
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

12/9/2020
Date

If signing on behalf of an entity:

Sandra K Pridemore CPA PA

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)