P08000101889

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: WORLDGLASS CORPORATION

Name of Corporation

POCUMENT NUMBER, P08000101889

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:

David Daniels

Name of Contact Person

WORLDGLASS CORPORATION

Firm/Company

5600 Airport Blvd, Suite C

Address

Tampa, FL 33634

City/State and Zip Code

david@danielscorporation.com

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

For further information concerning this matter, please call:

David Daniels

, 813

265-4014 230.6225

Name of Contact Person

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

	1	617.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of Florida	
in orde	er to change its registered office o	r registered agent, or both, in the State of Florida.	
1. The name of	the corporation: WORLDGLA	ASS CORPORATION	
2. The principa	office address: 5600 Airport	Blvd, Suite C, Tampa, FL 33634	
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: _\\\\	1/2008 Document number: P08000101889	
	d street address of the current regi rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	Daniel F Daniels		
	4014 Gunn Hwy, Suite	160	
	Tampa, FL 33618		
6. The name an (if changed):	-	red agent (if changed) and /or registered office 5	η
	5600 Airport Blvd, Suit	10 m	
•		Box NOT acceptable	
	Tampa, FL 33634		
The street addr as changed wil	ress of its registered office and the label labe	e street address of the business office of its registered agent	t,
Such change wauthorized by t	as authorized by resolution duly the board, or the corporation has l	adopted by its board of directors or by an officer so been notified in writing of the change.	
2.0		David Daniels, C.F.O.	
	ure of an officer or director t the appointment as registered a to comply with the provisions of f my duties, and I am familiar wit his document is being filed merely a that the corporation has been no	Printed or typed name and title gent and agree to act in this capacity. all statutes relative to the proper and complete th and accept the obligation of my position as registered to to reflect a change in the registered office address, I otified in writing of this change.	
9.0		11/17/15	
Si	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
David Dan	iels Typed or Printed Name	_	
		NG FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)