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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificate: | s of Status |
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Office Use Only



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COVER LETTER

Division of Corporations

SUBJECT: First Watch Home Inspection Services Inc.

Name of Corporation

DOCUMENT NUMBER: P08000103957

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:

Name of Contact Person First Watch Home Inspection Services Inc Firm/Company 227 Antilla Drive

Rotonda West Florida 33947

City/State and Zip Code

scott@oconnorpermits.com

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

For further information concerning this matter, please call:

Scott O'Connor at (941)830-1888

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

TO:

Amendment Section

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

| 1. The name of | of the corporation: First Watch F | Home Inspection Services, Inc rive Rotonda West Florida 33947 |
|---|---|---|
| 2. The princip | oal office address. | |
| 3. The mailin | g address (if different): | |
| 4. Date of inc | corporation/qualification: | Document number: P08000103957 |
| 5. The name a | | tered agent and registered office on file with the |
| | Scott O'Connnor | |
| | 227 Antilla Drive | |
| | | |
| | - | 33947 ed agent (if changed) and /or registered office |
| 6. The name a | Scott O'Connor | ed agent (if changed) and /or registered office |
| | Scott O'Connor | ed agent (if changed) and /or registered office we NoT acceptable 33947 |
| (if changed | and street address of the new registered): Scott O'Connor 227 Antilla Drive P.O. B Rotonda West, Florida | ed agent (if changed) and /or registered office |
| (if changed The street adas changed w | and street address of the new registered): Scott O'Connor 227 Antilla Drive P.O. B Rotonda West, Florida dress of its registered office and the will be identical. | ed agent (if changed) and /or registered office Rox NOT acceptable 33947 |
| The street adas changed w | and street address of the new registered): Scott O'Connor 227 Antilla Drive P.O. B Rotonda West, Florida dress of its registered office and the will be identical. | ed agent (if changed) and /or registered office lox NOT acceptable 33947 street address of the business office of its registered agent, |
| The street adas changed w Sueh change authorized by Sign I hereby accellate the performance agent. Or, if | Scott O'Connor 227 Antilla Drive Rotonda West, Florida dress of its registered office and the vill be identical. was authorized by resolution duly are to comply with the provisions of a get to comply with the ground the | ed agent (if changed) and /or registered office lox NOT acceptable 33947 street address of the business office of its registered agent, dopted by its board of directors or by an officer so een notified in writing of the change. Scott County Printed or typed name and title ent and agree to act in this capacity. It statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I |

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

Typed or Printed Name