## P08000107339

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SECRETARY OF STAVE SHVISION OF CORPORATION

RAROCH8
10.28.13

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Surrect: Amicon Construction Services, Inc.

Name of Corporation

OCUMENT NUMBER: P08000107339

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:

Michael D. Mopsick

Name of Contact Person

c/o Shapiro, Blasi, Wasserman & Gora, PA

Firm/Company

7777 Glades Road, Suite 400

Address

Boca Raton, FL 33434

City/State and Zip Code

mdmopsick@sbwlawfirm.com

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

For further information concerning this matter, please call:

Michael D. Mopsick

561

477-7800

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

. .

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Amicon Construction Services, Inc.
2. The principal	office address: 2400 N.E. 2 AVENUE, SUITE B, MIAMI, FL 33137
3. The mailing a	ddress (if different): same
4. Date of incorp	poration/qualification: 12-10-08 Document number: P08000107339
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	BDB AGENT CO., 5355 TOWN CENTER
	ROAD, SUITE 900, BOCA RATON, FL 33486
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office  Michael D. Mopsick, Esq., c/o Shapiro, Blasi,  Wasserman & Gora, PA, 7777 Glades Rd.,
	Michael D. Mopsick, Esq., c/o Shapiro, Blasi,
	Wasserman & Gora, PA, 7777 Glades Rd.,
	P.O. Box NOT acceptable Suite 400, Boca Raton, FL 33434
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identified.
//	as authorized by resolution duly adopted by its board of directors or by an officer so be board of the corporation has been notified in writing of the change.
Signatu	re of an officer or director  Printed or typed name and title
	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
My	pature of Registered Apon Price 10/11/13
If signing on bo	half of an entity:
T	yped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/(2)

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