## 990000890

| (Re                                     | equestor's Name)   | · · · · · · |  |  |
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| PICK-UP                                 | ☐ WAIT             | MAIL        |  |  |
| (Ви                                     | siness Entity Nan  | ne)         |  |  |
| (Document Number)                       |                    |             |  |  |
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## COVER LETTER

TO: Amendment Section **Division of Corporations** 

Change of address for business

P09000008690

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:

Debra L Montak

Name of Contact Person

Express Drain & Sewer Cleaning, Inc.

Firm/Company

P.O. Box 121957

Fort Lauderdale, FL 33312

City/State and Zip Code

expressdrain@yahoo.com

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

For further information concerning this matter, please call:

Debra Montak

Name of Contact Person

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   | nge is submitted for a corporation                                       | 517.0502, 607.1508, or 617.1508, Florida<br>n organized under the laws of the State of<br>r registered agent, or both, in the State of  | Florida                                  |                                       |
|--|--|---|--|---------------------------------------|
| 1. The name of   | the corporation: Express Dra   | in & Sewer Cleaning, Inc.   |  |                                       |
| 2. The principal   | office address: 5801 Mayo S  | Street, Hollywood, FL 33023 (N  | ew Address)                              |                                       |
|  |  |   | - ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- |                                       |
| 3. The mailing a   | ddress (if different): P.O. Box  | 121957, Fort Lauderdale, FL 3   | 33312                                    |                                       |
| 4. Date of incorporation/qualification: 1/28/2009 Document number: P0900008690 |  |   |  |                                       |
| 5. The name and  |  | stered agent and registered office on file w  | rith the                                 |                                       |
|  | Benjamin Montak  |   | 2/41.5                                   |                                       |
|  | 1830 SW 51st Terrace   |   | SEC                                      | <b>ಪ</b>                              |
|  | Plantation, FL 33312   |   | AHASS                                    | · · · · · · · · · · · · · · · · · · · |
| 6. The name and (if changed):  | d street address of the new register                                     | red agent (if changed) and /or registered of  | ffice 原介<br>記S                           | 20 84 3                               |
|  | Benjamin Montak  |   | A A                                      | 2: 40                                 |
|  | 5801 Mayo Street   |   |  |                                       |
|  | Hollywood, FL 33023  | Box NOT acceptable  |  |                                       |
| The street address changed will  | ess of its registered office and the be identical.                       | e street address of the business office of it   | ts registered agen                       | t,                                    |
| Such change was authorized by the  | as authorized by resolution duly a<br>ne board, or the corporation has b | adopted by its board of directors or by an open notified in writing of the change.  | officer so                               |                                       |
| Allea  | & Merch  | Debra L Montak, Presid  |  |                                       |
| I hereby accept I further agree of   | to comply with the provisions of my duties, and I am familiar wit        | gent and agree to act in this capacity.<br>all statutes relative to the proper and con<br>h and accept the obligation of my positio<br>to reflect a change in the registered offic<br>tified in writing of this change. | nplete<br>n as registered                |                                       |
| Sig  | nature of Registered Agent   | Date  |  |                                       |
| If signing on be   | half of an entity:   |   |  |                                       |
| Т  | yped or Printed Name   | -   |  |                                       |

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