P09000013210

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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08/01/11--01032--010 **35.00

R.A.

Brown 8-3-11

COVER LETTER

	of Corporations	
SUBJECT:	SPF Quality Home Son Name of Corp	ervices, Inc.
	Name of Corp	oration
DOCUMENT N	jmber: <u>P090000 1</u>	3210
The enclosed State	ement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all c	orrespondence concerning this matter to	the following:
	Owner D	
	Susan R Name of Contac	yan et Person
	Name of Contact	
	SPF Quality Home	
	Firm/Comp	pany
	2330 4th Lar	no SW
	Address	
	Vero Beach, F	L 32962
	City/State and 2	Zip Code
	SPFQualityHomeService	ces@gmail.com
-	E-mail address: (to be used for future	
For further inform	ation concerning this matter, please call:	-02 5/8 /2//0
\leq	ation concerning this matter, please call: しいらなっ Ryan	772-569-6340
Na	Philip Ryan me of Contact Person	Area Code & Daytime Telephone Number
140	ine of Contact i cison	Area code & Dayume Telephone Number
Enclosed is a \$35.	00 check made payable to the Departmen	nt of State. CK# 1025
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Amendment Section Division of Corporations	Amenament Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: SPF Quality Home Services Inc. 2. The principal office address: 2330 4Th Ln SW Vero Beach FL 32962
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/16/2009 Document number: 1090000 13210
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)
Business Filings Incorporated 1203 Governors Square Blvd., Ste 101 Tallahassee, FL 32301-2960
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Susan Ryan
2330 4th Lane SW P.O. Box NOT acceptable
Vero Beach, FL 32962
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.
Susan Reyan Signature of an officer or director Printed or typed name and little
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.
Susan Ryan Signature of Revistered Agent
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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