| , (Re | equestor's Name) | | | | | |
|---|--------------------|--------------------|--|--|--|--|
| (Address) | | | | | | |
| (Address) | | | | | | |
| (Cit | ty/State/Zip/Phone | > #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| Certified Copies | _ Certificates | of Status | | | | |
| Special Instructions to Filing Officer: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Office Use Only

5/409



800155657918

05/08/09--01019--008 **35.00

· COVER LETTER

| то: | Amendme Division o | nt Section f Corporations | | | | | |
|---------|--|---|--------------------------------------|---|--|--|--|
| SUBJE | CCT: | Precision Power | dercoating of | Miami, Inc. | | | |
| DOCU | MENT NU | MBER: | P0900001 | 6135 | | | |
| The en | closed State | ment of Change of Registe | ered Office/Agent | and fee are submi | itted for filing. | | |
| Please | return all co | rrespondence concerning t | this matter to the f | ollowing: | | | |
| | | No | Richard Barne | | | | |
| | | Na | ime of Contact Per | Son | | | |
| | Precision Powdercoating of Miami, Inc. | | | | | | |
| | | | Firm/Company | | | | |
| • | | 14 | 1243 sw 150th | ave | | | |
| | | | Address | | | | |
| | | | Miami fl, 33196 | 3 | | | |
| | | Ci | ty/State and Zip C | ode | | | |
| | | Precisionpowde E-mail address: (to be u | rcoatingofmian ised for future ar | ni@hotmail.cor nnual report noti | n fication) | | |
| For fur | ther inform | ation concerning this matte | er, please call: | | | | |
| | | Richard Barnes | at (| 786 ₎ | 314-8498 ime Telephone Number | | |
| | Na | me of Contact Person | A | rea Code & Dayt | ime Telephone Number | | |
| Enclose | ed is a \$35.0 | 00 check made payable to | the Department of | State. | | | |
| | | Mailing Address: Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32 | rations | Street Address Amendment S Division of C Clifton Buildi 2661 Executiv Tallahassee, I | ection orporations ing ve Center Circle | | |

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

| | | | 607.1508, or 617.1508, Fl ed under the laws of the Sta | | |
|---|--|---|---|---|--|
| | | | d agent, or both, in the Sta | | |
| 1. The name of | the corporation: Precis | sion Powderc | oating of Miami In | с. | |
| 2. The principa | l office address: 14243 | sw 150th ave | | | |
| Miami fl, 3 | 33196 | | | | |
| 3. The mailing | address (if different): 13 | 220 sw 132 ave | #3 | | |
| Miami fl | , 33186 | | | · · · · · · · · · · · · · · · · · · · | |
| 4. Date of incom | rporation/qualification: | 2/19/2009 | Document number: | P09000016135 | |
| 5. The name an Florida Depa | d street address of the cur artment of State: (If resign | rent registered ager ed, enter resigned) | nt and registered office on | file with the | |
| | Richard Barnes | | | | |
| | 14243 sw 150th av | e | | 2009 HAY SECRET | |
| | Miami fl, 33196 | | | AY -8 ETARY HASSI | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Richard Barnes | | | | | |
| | Richard Barnes | | | ATE ORIDA | |
| | 13220 sw 132 ave | | | <u> </u> | |
| | Minmi fl. 22406 | P.O. Box NOT ac | ceptable | | |
| | Miami fl, 33186 | | | <u> </u> | |
| The street addr as changed wil | ess of its registered offic l be identical. | e and the street ad | dress of the business offic | ce of its registered agent, | |
| Such change w authorized by t | as authorized by resoluting the board, or the corporate | on duly adopted b ion has been notif | y its board of directors or led in writing of the chang | by an officer so ge. | |
| Richard Barnes VP Signature of an officer or director Printed or typed name and title | | | arnes VP | | |
| I hereby accept I further agree of my duties, at document is be corporation ha | t the appointment as regit to comply with the provind I am familiar with and ing filed merely to reflect to been notified in writing | stered agent and a sions of all statute I accept the obliga t a change in the r g of this change. | igree to act in this capaci s relative to the proper ar tion of my position as reg egistered office address, i | ty. Ind complete performance vistered agent. Or, if this I hereby confirm that the | |
| 5/5/2009 | | | | | |
| · | gnature of Registered Agent | | Date | | |
| it signing on be | chalf of an entity: | | | | |
| | Richard Barnes Typed or Printed Name | | | | |

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