

P09000064786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

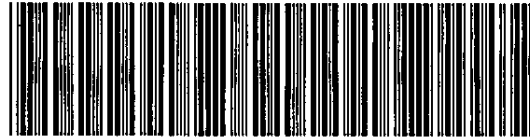
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Miles Construction & Equipment Corporation
Name of Corporation

DOCUMENT NUMBER: P09000064786

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:

Dorothy Vondra

Name of Contact Person

Miles Construction & Equipment Corporation

Firm/Company

320 Neapolitan Way

Address

Naples, FL 34103

City/State and Zip Code

Kellyh@grp7.com ✓

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

For further information concerning this matter, please call:

Kelly Hubbard

Name of Contact Person

at (630) 497-8700

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2016

BLUFF CITY MATERIALS, INC.
2252 SOUTHWIND BLVD
BARTLETT, IL 60103

SUBJECT: BLUFF CITY MATERIALS, INC.

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

The attached check was received in our office without any supporting documentation. We currently do not have a corporation by this name in our office so we do not know what you are trying to do. If you need to file something in our office please submit the proper forms along with the check.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 616A00023099

**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 Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Miles Construction & Equipment Corporation
2. The principal office address: 320 Neapolitan Way Naples, FL 34103

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/31/2009 Document number: P09000064786

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)

Brian F. Lansu
16108 Edgemont Dr.
Fort Meyers FL 33908

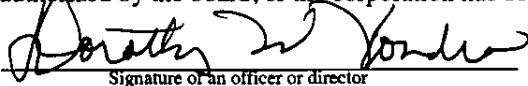
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Dorothy Vondra
320 Neapolitan Way
Naples, FL 34103

P.O. Box NOT acceptable

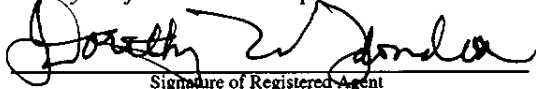
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


Signature of an officer or director

Dorothy Vondra, Vice President
Printed or typed name and title

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.


Signature of Registered Agent

10/21/10
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)