P100000000268

(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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Q. SILAS FEB 04 2022				
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COVER LETTER

то:	Amendment Section Division of Corporations	
SUBJI Name	ECT: Daniels Fence Corp of Corporation	
DOCU	JMENT NUMBER: P10000000268	
The en	closed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning thi	s matter to the following:
Daniel :	Lawrence	
Name o	of Contact Person	
Daniels	s Fence Corp	
Firm/C	Company	
2700 SI	E Market Place Unit 1	
Addres	SS	***************************************
Stuart, I	FL 34997	
City/St	ate and Zip Code	
	operations@danielsfence.com	n
E-mail	address: (to be used for future annua	ll report notification)
For furt	ther information concerning this matter,	please call:
Daniel I	Lawrence	772 \283-2383
 -	Name of Contact Person	at (772)283-2383 Area Code & Daytime Telephone Number
Enclose	ed is a \$35.00 check made payable to the	
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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 State ange is submitted for a corporation organized under the laws of the State of Flori er to change its registered office or registered agent, or both, in the State of Flori	ida	this		
	the corporation: Daniels Fence Corp	144.			
	l office address: 2700 SE Market Place Unit 1 Stuart, FL 34997				
3. The mailing a	address (if different):			<u>-</u> -	
4. Date of incor	58				
	d street address of the current registered agent and registered office on file with the trument of State: (If resigned, enter resigned)	he			
	Registered Agent: Lawrence, Daniel				
Registered Office: 1336 SW Alligator Street Palm City, FL 34990					
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): New Address for Registered Office:					
		<u> </u>		اد میراند در میراند در میراند	
2700 SE Market Place Unit 1 Stuart, FL 34997 P.O. Box NOT acceptable					
	NO CHANGE to Registered Agent.	Half	l: 16	· Section 1	
The street address changed will	ess of its registered office and the street address of the business office of its re I be identical.	gister	rcd ag	ent,	
Such change was the such change with the such chang	as authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change. Daniel Lawrence, President Printed or typed name and title	icer s	o —	_	
Jan	t 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 completed a familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address. I hereby of statute of the writing of this change. Spatial Complete Agent Complete Agent Date	te pei zent. onfiri	rforme Or, if n that	ince this the	
	chalf of an entity:				
Daniel	Cowlence Croed or Printed Name				

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