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C. LEWIS

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EXAMINER

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Allied Doors South Florida, Inc.

Name of Corporation

DOCUMENT NUMBER: P10000025717

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:

Louis C. Anderson

Name of Contact Person

Louis C. Anderson, J.D. P.L.

Firm/Company

224 Commercial Blvd., #310

Address

Lauderdale by the Sea, FL 33308

City/State and Zip Code

mjr@allied-doors.com

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

For further information concerning this matter, please call:

Louis C. Anderson

ame of Contact Person

,954

772-8050

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

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

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes. Inge is submitted for a corporation organized under the laws of the State of Florida	this		
	to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of the	he corporation: Allied Doors South Florida, Inc.			_
2. The principal	office address: 151 SW 5 Court, Pompano Beach, FL 33060			
3. The mailing a	ddress (if different):			<del>-</del>
4. Date of incorp	poration/qualification: 03/23/2010 Document number: P10000025	717		_
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)			
	David, Roy, Esq.			
	David R. Roy, P.A.		13 D	
	4209 N Federal Highway, Pompano Bch., FL 33064	発音の表	DEC 19	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	SEEL SEE	9 PM 4:	
	Michael Romanelli		 ယ ယ	
	151 SW 5th Court	35	~	
	P.O. Box NOT acceptable			
	Pompano Beach, FL 33060			
The street address changed will	ess of its registered office and the street address of the business office of its regist be identical.	tered age	nt,	
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer he board, on the corporation has been notified in writing of the change.	so		
Mignati	Dennis Romanelli, Presi	dent	-	
I further agree performance of avent Or, if the	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 complete f my duties, and I am familiar with and accept the obligation of my position as reg nis document is being filed merely to reflect a change in the registered office addr n that the corporation has been notified in writing of this change.	zistered ess, I		
/// best	Editure of Registered Agent Date		_	
1	chalf 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