

P10000038663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

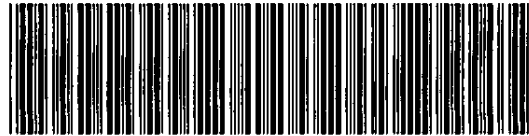
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100187363131

RA  
Change

11/05/10--01015--002 \*\*35.00

FILED  
2010 NOV -5 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA  
11/8/10

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: PAK CONST' INC  
Name of Corporation

DOCUMENT NUMBER: P10000038663

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:

PAUL A KASPEREK  
Name of Contact Person

PAK CONST' INC  
Firm/Company

35746 OAK RIDGE DR  
Address

LEESBURG FL 34788  
City/State and Zip Code

elvis619@embarqmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL A KASPEREK at ( 352 ) 357-0691  
Name of Contact Person 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**

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: PAK CONST. INC.  
2. The principal office address: 35746 OAK RIDGE DR, LEESBURG FL 34788

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 05/04/2010 Document number: P10000038663

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)

PATTI LEVIN

1250 MT HOMER RD, SUITE 8

EUSTIS, FL 32726

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

PAUL A KASPEREK

35746 OAK RIDGE DR

P.O. Box NOT acceptable

LEESBURG FL 34788

**FILED**  
2010 NOV -5 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

*Paul Kasper*

Signature of an officer or director

PAUL A KASPEREK

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

10-27-10

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 (8/05)