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COVER LETTER

Amendment Section

TO:

Division of Corporations

SUBJECT: ABOVE BOORD RNC CONSTRUCTION JPC .

Name of Corporation

DOCUMENT NUMBER: PHODOSOO J.

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:

PACE R. Schul Name of Contact Person

Albove Pour RNC Construction JPC .

Firm/Company

3188 Pougou Lone

Address

TOVAYES, Florida 32778

City/State and Zip Code

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

For further information concerning this matter, please call:

ROBER SCHUL 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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 Stating is submitted for a corporation organized under the laws of the State of \frac{1}{2} represented in the State of the State of Flore to change its registered office or registered agent, or both, in the State of Flore to change its registered office or registered agent, or both, in the State of Flore to change its registered agent, or both, in the State of Flore to change its registered agent.	-10r	١ ١	7_		
	1. The name of the corporation: Above Board RNC CONSTRUCTION INC. 2. The principal office address: 3188 Boyou Lone, Tavares, F1 327						
	3. The mailing address (if different):						
	4. Date of incorporation/qualification: 10/25/2011 Document number: P1/00092902						
		I street address of the current registered agent and registered office on file with timent of State: (If resigned, enter resigned)	he				
		1800 NW 11841 Avenue	SECRETARY OF	2023 SEP 29 AM	FILED		
. C.	6. The name and (if changed):	Street address of the new registered agent (if changed) and /or registered office 3188 BOYCU LONE TOVOYES, FICTICA 32778 P.O. Box NOT acceptable	Algorith ALVIS	H 9: 46			
	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 the Signature	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. Robert Schul Printed or typed name and title	icer so	3 iC	len t		
		the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and comple d I am familiar with and accept the obligation of my position as registered an ng filed merely to reflect a change in the registered office address. I hereby of been notified in writing of this change. All Date	gent. O confirm	r if t that t	nie his he		
	Robert	half of an entity:					

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

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