

P11000 108648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

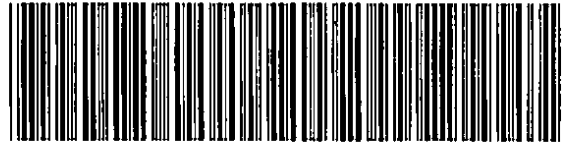
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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LBM, INC.

Name of Corporation

**DOCUMENT NUMBER:** P11000108648

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:

Lucille Miano

Name of Contact Person

LBM, INC. d/b/a Wind Sail Realty

Firm/Company

321 Ocean Avenue, Suite 213

Address

Melbourne Beach, FL 32951

City/State and Zip Code

lucille1@att.net

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

For further information concerning this matter, please call:

Lucille Miano

321-749-3522

at ( )

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

**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: I.B.M. INC. d/b/a Wind Sail Realty
2. The principal office address: 321 Ocean Avenue, Suite 213, Melbourne Beach, Florida 32951
3. The mailing address (if different): P.O. Box 510315
4. Date of incorporation/qualification: 12/26/2011 Document number: P11000108648
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)

Lucille Miano, 5355 S. Hwy A1A, Melbourne Beach, FL 32951

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

Lucille Miano

321 Ocean Avenue, Suite 213, Melbourne Beach, FL 32951

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.

Lucille Miano Pres  
Signature of an officer or director

Lucille Miano

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.*

Lucille Miano Pres  
Signature of Registered Agent

3-17-2020

Date

If signing on behalf of an entity:

I.B.M. INC.

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 (04/13)