

## P/20000/2/10

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T. LEWIS

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Oth Construction Services Name of Corporation
DOCUMENT NUMBER: P12000012110
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:
Aleksand Ooglooskiy Name of Contact Person
At L Construction Services Firm/Company
800 Son Line Circle # 802 Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (941) 421-9729  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.
1. The name of the corporation: At L Construction Secures Inc.  2. The principal office address: 800 Sun ling circle # 800 Uenice fl, 3409.
3. The mailing address (if different):
4. Date of incorporation/qualification: 4-/3-12 Document number: P12000012110
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)
Alex Cosilevsking
642 Back Nine Dr. For is
Venice FL, 34285
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Olefor Vosileuskig  3572 abbots ford st.  P.O. Box NOT acceptable
North part FL,
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.
Signature of an office or director  Signature of an office or director  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  Date
If signing on behalf of an entity:

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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