## P13000014631

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				





400268414094

01/20/15--01031--014 \*\*35.00

SECRETARY OF STAIL OF STORE OF CORPORATIONS

CV3 15



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 23, 2015

WILLY DS HOME IMPROVEMENTS, INC. 23243 PEACHLANE BLVD PORT CHARLOTTE, FL 33954 US

SUBJECT: WILLY D'S HOME IMPROVEMENTS, INC.

Ref. Number: P13000014631

We have received your document for WILLY D'S HOME IMPROVEMENTS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must maintain a registered agent in the state of florida. Please list a new registered agent in the new agent field. You can not operate a corporation without an agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 115A00001455

## **COVER LETTER**

Amendment Section TO: **Division of Corporations** SUBJECT: Change of Registered Agent Name of Corporation P13000014631 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: William D. Daniels, Sr. Name of Contact Person Willy D's Home Improvements, Inc. Firm/Company 23243 Peachland Blvd. Pt. Charlotte, Fl 33954 City/State and Zip Code WilliamDaniels1@Comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (941 716-3351 Area Code & Daytime Telephone Number William D. Daniels, Sr. Name of Contact Person 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1  ange is submitted for a corporation organized und	der the laws of the State of Florida	
_	er to change its registered office or registered age		
1. The name of	the corporation: Willy D's Home Improv	ements, inc.	
	office address: 23243 Peachland Blvd.		
		<u> </u>	<u> </u>
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 02/13/2013	Document number: P13000014	631
5. The name and	d street address of the current registered agent and rtment of State: (If resigned, enter resigned)	d registered office on file with the	
	William D. Daniels, Jr. (Resigned	)	
	23243 Peachland Blvd.		
	Pt. Charlotte, Fl 33954		o
6. The name an (if changed):		anged) and /or registered office	FILE SECRETARY NISION OF CE
	William D. Daniels, Sr.		PM
	23243 Peachland Blvd.  P.O. Box NOT acceptable		# H H H H H H H H H H H H H H H H H H H
	Pt. Charlotte, Fl 33954	e	37
The street addr	ress of its registered office and the street address be identical.	s of the business office of its regist	ered agent,
Such change wathorized by	ras authorized by resolution duly adopted by its he board, or the corporation has been notified ir	board of directors or by an officer a writing of the change.	so
D Wills	an Vances SR Willi	iam D. Daniels, Sr.	
I hereby accept	ure of an officer of director  t the appointment as registered agent and agree to comply with the provisions of all statutes relo f my duties, and I am familiar with and accept the his document is being filed merely to reflect a che that the corporation has been notified in writin	ative to the proper and complete	gistered ess, I
W N Sty	gnature of Registered Agent Willi	iam D. Daniels, Sr.	<del></del>
If signing on be	ehalf of an entity:		
	Typed or Printed Name		
	* * * FILING FEE: \$35.	.00 * * *	