## P13000072329

(Re	equestor's Name)			
(Ad	ldress)			
(Au	uress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	me)		
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## COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJE	CT: C. Adams Construction Inc.		
Name o	f Corporation		
DOCU	MENT NUMBER: P13000072329		
The end	closed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please r	return all correspondence concerning this	matter to the following:	
Steven \	W Moore		
Name o	f Contact Person		
Law Off	fice of Steven W Moore		
Firm/Co	oinpany	-	
8240 11	8th Avenue N Suite 300		
Address	S	<del></del>	
Largo, F	Florida 33773		
City/Sta	ate and Zip Code	<del></del>	
	steven@stevenmoorepa.com		
E-mail	address: (to be used for future annual	report notification)	
For furt	ther information concerning this matter, p	please call:	
Steven V	W Moore	at (727 \ \)395-9300	
	Name of Contact Person	at (727 )395-9300 Area Code & Daytime Telephone Number	
Enclose	ed is a \$35.00 check made payable to the	Department of State.	
		Street Address:	
	Mailing Address: Amendment Section	Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327	The Centre of Tallahassee	
	Tallahassee, FL 32314	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 Sta unge is submitted for a corporation organized under the laws of the State of <mark>Flo</mark> er to change its registered office or registered agent, or both, in the State of Flo	orida		
1. The name of	the corporation: C. Adams Construction Inc.			
2. The principal	office address: 4505 West Beachway Dr, Tampa, Florida 33609			
3. The mailing a	address (if different):			_
4. Date of incorp	poration/qualification: 8/13/2013 Document number: P13000072	329		_
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	the		
	Charles C. Adams			
	4505 West Beachway Dr	26	2	
	Tampa, Florida 33609		<b>020</b> O	•
6. The name and street address of the new registered agent (if changed) and /or registered offi (if changed):		SVHVI	2020 OCT -6	
	Steven W Moore Esquire	SEE.	PH	i
	8240 118th Avenue N, Suite 300	72	2: 56	•
	P.O. Box NOT acceptable	TT.	Ų,	
	Largo, Florida 33773			
The street addreas changed will	ess of its registered office and the street address of the business office of its to be identical.	registere	d agent,	
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an olue board, or the corporation has been notified in writing of the change.	fficer so		
Signatu	re of arroHierr or director Printed or typed name and title	am	<u>`</u>	
oj my auties, an document is bei	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comp ad I am familiar with and accept the obligation of my position as registered in a filed merely to reflect a change in the registered office address, I hereby been notification writing of this change.	lete perfo agent. O confirm	ormance Ir, if this that the	•
	714/2020	<del> </del>	<del></del>	
	nation of Registered Agent Date			
If signing on be	half of an entity:			
T	yped 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)

FILED