

P140000027794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

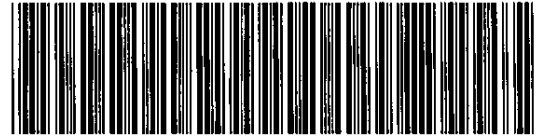
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/09/14--01033--005 \*\*35.00

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FILED  
CLERK OF DISTRICT COURT  
STATE OF MONTANA

R.A./R.D./CHS  
@ 6.19.14

***G. MAX RETTIG***  
**Professional Corporation**  
***Attorney at Law***

4622 W. 72nd St., Ste. C  
Indianapolis, IN 46268

mrettiglaw@gmail.com

Telephone: (317) 216-7464  
Facsimile: (317) 216-7461

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June 6, 2014

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Dirty Surface Solutions Inc.  
P14-0000 27794

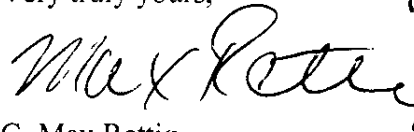
Dear Sir or Madam:

Please file the enclosed Statement of Change of Registered Office or Registered Agent or Both for Corporations, and return a file-marked copy to me in the enclosed envelope.

A check for \$35.00 is enclosed for the filing fee.

Please call or email, if you have any questions or comments.

Very truly yours,



G. Max Rettig,  
Attorney at Law

**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: DIRTY SURFACE SOLUTIONS INC.
2. The principal office address: 8771 WESLEYAN DR APT 1609  
FORT MYERS FL 33919
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/26/14 Document number: P14000027794

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)

MICHAEL R RETTIG

1715 COUNCIL DR

SUN CITY CENTER, FL 33573

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

CRAIG D SHELBY JR

8771 WESLEYAN DR APT 1609

P.O. Box NOT acceptable

FORT MYERS, FL 33919

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.

X C D Shelby  
Signature of an officer or director

CRAIG D SHELBY JR PRESIDENT

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.*

X C D Shelby  
Signature of Registered Agent

6-2-2014

Date

If signing on behalf of an entity:

\_\_\_\_\_  
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 (03/12)

FILED  
DIVISION OF STATE  
CORPORATIONS  
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