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(Re	questor's Name)	
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## COVER LETTER

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Division of Corporations

**DOCUMENT NUMBER:** 

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:

AUON CONSTRUCTION
Firm/Company

For further information concerning this matter, please call:

Name of Contact Person at (

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

TO:

Amendment Section

## 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 Flo Rides
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: PAUDN CONSTRUCTION IUC.
2. The principal office address: 15015 SW 298 TERRACE.  HOMESTEAD F1 33033
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/24/14 Document number: P/40000876//
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)
KAREN MORAles
29617 Sw 162nd Ave
Homestead F1 3303.3
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LAHASS LARGE 30 DEC 30
15015 SW 298 terrace  P.O. Box NOT acceptable  Homestend, F1 33033
Homestend, F1 33033 FST 3
The street address of its registered office and the street address of the business office of its registered gent, 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.
Holizature of an officer of director Diving Pauon 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.
Ydhin Signature of Registered Agent 12/22/2014
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)