

P150000 21366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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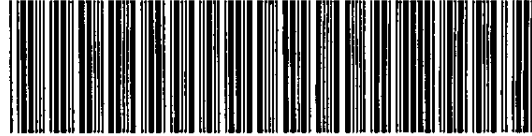
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature*

MAR 03 2016

T. LEMIEUX

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Herman and Alma Constructions Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P15000021366

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:

JoAnn S McBride

Name of Contact Person

Herman and Alma Constructions Inc.

Firm/Company

2028 S Martin Luther King Jr. Dr.

Address

Winston Salem NC. 27107

City/State and Zip Code

hremman.and.alma@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JoAnn S McBride

Name of Contact Person

at ( 336 ) 608-6006

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 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Herman and Alma Constructions Inc.
2. The principal office address: 2028 S Martin Luther King Jr. Dr.  
Winston Salem NC 27107
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: March 05, 2015 Document number: P15000021366
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)

Legalinc Corporate Services Inc.

5237 Summerlin Commons suite 400

Fort Myers, FL. 33907

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

Dwayne Smith

4642 W Gore Ave.

P.O. Box NOT acceptable

Orlando, Fl. 32811

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.

JoAnn S McBride  
Signature of an officer or director

JoAnn S McBride CFO

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

2/24/2016  
Date

If signing on behalf of an entity: JoAnn S McBride

JOANN S McBride  
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)

SECRETARY OF STATE  
TALLAHASSEE, FL 32304

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