

P15000031291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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STATE OF ALABAMA
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EXTREME CLEAN OF FLORIDA, INC
Name of Corporation

DOCUMENT NUMBER: P15000031291

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:

JANA HUTCHINS
Name of Contact Person

231 FOXTAIL DR, UNIT H
Firm/Company
Address
GREENACRES, FL 33415
City/State and Zip Code

thehutchinsfamily3@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JANA HUTCHINS at (561) 232 9018
Name of Contact Person 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: EXTREME CLEAN OF FLORIDA, INC.
2. The principal office address: 231 FOXTAIL DR. UNIT H
GREENACRES FL 33415
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/31/15 Document number: P15000031291

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)

JANA HUTCHINS
671 JENKINS ST
SEBASTIAN FL 32958

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

JANA HUTCHINS
231 FOXTAIL DRIVE, UNIT H
GREENACRES FL 33415
P.O. Box NOT acceptable

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SECRETARY OF STATE

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.

[Signature]
Signature of an officer or director

JANA HUTCHINS
Printed or typed name and title

PRESIDENT

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
herby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

4/13/16
Date

If signing on behalf of an entity:

JANA HUTCHINS
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)