

P15000046221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

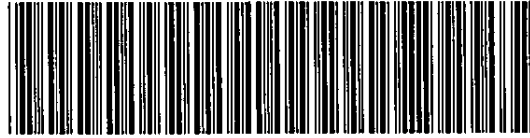
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gang of Two Inc
Name of Corporation

DOCUMENT NUMBER: P15000046221

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:

Gregg L. Duarte
Name of Contact Person

Window Gang of West Florida
Firm/Company

3201 #4 118th Ave. N.
Address

St. Petersburg, FL 33716
City/State and Zip Code

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Gregg L. Duarte at (919) 796-8478
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 8, 2015

GREGG L. DUARTE'
WINDOW GANG OF WEST FLORIDA
3201 #4 118TH AVE N
ST PETERSBURG, FL 33716

SUBJECT: GANG OF TWO, INC.
Ref. Number: P15000046221

We have received your document for GANG OF TWO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

What changes are you making on this form. You have N/A in section 6(?).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 215A00014213

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

1. The name of the corporation: Gang of Two Inc
2. The principal office address: 3201 118th Ave N Unit 4
St Petersburg FLA 33716
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5-27-2015 Document number: 47-4103906
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)

6946 Old Pasco Rd NCM 226
Wesly Chapel FL 33544

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

3201 118th Ave N #4
St Petersburg FLA 33716

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA
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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

Gregg DUARTE 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.

[Signature]
Signature of Registered Agent

8-6-2015
Date

If signing on behalf of an entity:

Gregg DUARTE president
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