Division of Corporations

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Division of Corporations

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From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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REGISTERED AGENT CHANGE HANKIN'S RESIDENTIAL SPECIALTY PAINTING, INC.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation organ ir to change its registered office or registe	ized under the laws of the State of $\underline{\mathbb{I}}$	florida
1. The name of	the corporation: Hankin's Residential Spec	sialty Painting, Inc	
2. The principal OCALA, FL 34-	office address: 10958 SOUTHWEST 86T	H COURT	
3. The mailing a	address (if different): P.O. BOX 771221, C	OCALA, FL 34477 UN	
	poration/qualification: 07/23/2015		2861
5. The name and	d street address of the current registered a rtment of State: (If resigned, enter resigne	gent and registered office on file wit	
	LAURENCE HANKIN		~
	10958 SOUTHWEST 86TH COURT		SECT SECT NAZH D
	OCALA, FL 34481		
6. The name and (if changed):	d street address of the new registered ages	nt (if changed) and /or registered offi	2024 DEC 18 AN IO: I
	Corporate Creations Network Inc		第3 5
	801 US Highway 1		" •
	P.O. Bor North Palm Beach, FL 33408	v NOT acceptable	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its	registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted he board, or the corporation has been no	I by its board of directors or by an cutified in writing of the change.	officer so
street	la lavarez	Estrella Tavarez, Attorney-in-Fact Printed or typed name and title	
of my duties, an document is bei	the appointment as registered agent an to comply with the provisions of all stat ad I am familiar with and accept the obl ing filed merely to reflect a change in th s been notified in writing of this change.	d agree to act in this capacity. utes relative to the proper and com- igation of my position as registered e registered office address. I hereby	plete performance ayent. Or, if this
strella To		12/17/2024 Date	
If signing on be	chalf of an entity:		
Estrella Tavarez.	. Special Secretary		
1	yped or Printed Name		
	* * * FILING FE	EE: \$35.00 * * *	