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OCHEY
MAY 03 2017
R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: HAYES EXHIS DESIGN CORPORATION  Name of Corporation			
DOCUMENT NUMBER: P15000066364			
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:			
MICHAEL HAYES  Name of Contact Person			
Firm/Company			
773 107TH AVENUEN			
NAPLES FL 34108  City/State and Zip Code			
michael@hayeselkins.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
MICHAEL HAMES at (239) 222-0090  Name of Contact Person at (239) 222-0090  Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section  Division of Corporations Division of Corporations			
Division of Corporations  P.O. Box 6327  Division of Corporations  Clifton Building			
Tallahassee, FL 32314 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 FUELD4	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: HAYES EXKINS DESIGN CORP.	
2. The principal office address: 773 107TH AVENUE N	
NAPLES, FL 34108	
3. The mailing address (if different):	
4. Date of incorporation/qualification: AVE. 6, 2015 Document number: P1500066364	<u></u>
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)	
& BIZFIUNGS	
8020 EXCESSION DR. SUITE 200	
MADISON, WI 53717	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	٠.
MICHAEL HAYES	<u>.</u>
773 1070H AVENUEN 3	
P.O. Box NOT acceptable	
NAPUS, 12 34108 " =	
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 of an officer or director  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.	
July Hayls 4/12/17 Signature of Kegistered Agent Date	
If signing on verme of an entity:	
Typed or Printed Name	
-12-4 44 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	

\* \* \* FILING FEE: \$35.00 \* \* \*