

P16 0000006311

(Requestor's Name)

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(Business Entity Name)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Strategic Maintenance Solutions Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P16000006311

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:

Toni Lavigne

Name of Contact Person

Strategic Maintenance Solutions Inc

Firm/Company

2495 C.R. 722

Address

Webster Fl. 33597

City/State and Zip Code

Info@StrategicMaintenanceinc.com

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

For further information concerning this matter, please call:

Toni Lavigne

Name of Contact Person

at (352) 457-2409

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Strategic Maintenance Solutions, Inc.
2. The principal office address: 2495 C.R. 722 Webster, Florida 33597
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 1/22/2016 Document number: P16000006311
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)

Tyler Stulken

2495 C.R. 722 Webster, FL 33597

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

Toni Lavigne

2495 C.R. 722 Webster, FL 33597

P.O. Box NOT acceptable

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

Tyler J Stulken P  
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

11/2/2020  
Date

If signing on behalf of an entity:

Tyler J Stulken  
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 (04/13)

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