P16 0000 32964

| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: SmartVentilation, Inc.

Name of Corporation

DOCUMENT NUMBER

P16000032964

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:

Wayne Dean, Jr.

Name of Contact Person

SmartVentilation, Inc.

Firm/Company

3903 Dr. Martin Luther King, Jr. Blvd. #11

Address

Fort Myers, FL 33916

City/State and Zip Code

iaq@smartventilation.com

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

For further information concerning this matter, please call:

Wayne Dean Jr.

.239

571-2227

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 statement of change is submitted for a corporation organizing in order to change its registered office or register. | zed under the laws of the State of Florida |
|--|---|
| 1. The name of the corporation: SmartVentilation, I | |
| 2. The principal office address: 3903 Dr. Martin Lu Fort Myers, FL 33916 | |
| 3. The mailing address (if different): | |
| 4. Date of incorporation/qualification: 4/11/16 | Document number: P16000032964 |
| 5. The name and street address of the current registered ag Florida Department of State: (If resigned, enter resigned | ent and registered office on file with the |
| Wayne Dean, Jr. | |
| 3903 Dr. Martin Luther King, | Jr. Blvd. #11 |
| Fort Myers, FL 33916 | Gr. BIVO. #11 |
| 6. The name and street address of the new registered agent (if changed): | (if changed) and /or registered office: |
| Wayne Dean Jr. | ————————————————————————————————————— |
| 1408 SW 5th Place | |
| Cape Coral, FL 33991 | ceptable |
| The street address of its registered office and the street ac as changed will be identical. | Idress of the business office of its registered agent, |
| Such change was authorized by resolution duly adopted be authorized by the board, or the corporation has been notified. | y its board of directors or by an officer so lied in writing of the change. |
| Signature of an officer of director | Wayne Dean, Jr. President |
| I hereby accept the appointment as registered agent and a I further agree to comply with the provisions of all statute performance of my duties, and I am familiar with and acc agent. Or, if this document is being filed merely to reflec hereby confirm that the corporation has been notified in y | an unlative to the secondary wild |
| Wayrelfant. | 10/9/2019 |
| Signature of Registered Agent If signing on behalf of an entity: Typed or Printed Name | Date |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

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