

P/7000061793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

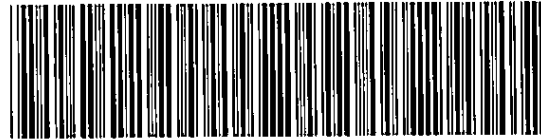
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900331273839

FILED
JUL - 1 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 15 2007

T. SCHWABER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: First Class Plumbing, Inc
Name of Corporation

DOCUMENT NUMBER: P17000061793

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:

Brittany Howard

Name of Contact Person

First Class Plumbing, Inc

Firm/Company

3705 Allen St. W

Address

Raleigh, NC 27603

City/State and Zip Code

firstclassplumbingcompany@gmail.

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

For further information concerning this matter, please call:

Brittany Howard

Name of Contact Person

at (919) 584-0911

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, 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: First Class Plumbing, Inc
2. The principal office address: 3705 Allen St. W Raleigh, NC 27603

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/20/2017 Document number: P17000061793

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)

Brittany Howard

649 NW Cardinal Drive

Port st lucie, FL 34983

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

Registered Agents Inc.

7901 4th st. N Ste 300

P.O. Box NOT acceptable

St. Petersburg, FL 33702

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 JUL - 1 AM 11:07

FILED

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.

Brittany Howard
Signature of principal or director

Brittany Howard

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, 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.

Bill Howe
Signature of Registered Agent

06/27/2019

Date

signing on behalf of an entity:

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