Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

REGISTERED AGENT CHANGE RICHARDSEAN CONSTRUCTION INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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Help

J- 3/30/2022

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

statement of cha	nge is submitted for a corporation org	502, 607.1508, or 617.1508, Florida State anized under the laws of the State of Flor	ida		
in orde	r to change its registered office or regi	stered agent, or both, in the State of Flor	ida.		
I. The name of	the corporation: RichardSean Con	struction Inc.			
2. The principal	office address: 1093 A1A Beach b	lvd STE 300			
St. Augustine	e FL 32080				
3. The mailing a	address (if different): 7901 4th St N	STE 300 St. Petersburg FL 3370)2		
4. Date of incor	poration/qualification: 09/15/17	Document number: P1700007	'6303		
	I street address of the current registered timent of State: (If resigned, enter resigned)	l agent and registered office on file with t ned)	he		
	Fulmer, Richard S			20:	
	119 ASHLEY LAKE DR	119 ASHLEY LAKE DR		1022 HAR 29	c :
	Melrose, FL 32666	Melrose, FL 32666		R 29	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offic		SSEE, F	AM 8: 2:	(
Northwest Registered A		ent LLC	ATE	23	
	7901 4th St N STE 300				
P.O. Box NOT acceptable					
	St. Petersburg FL 33702				
The street address changed will	ess of its registered office and the strebe identical.	et address of the business office of its re	gistered	d agent,	
Such change was authorized by the	as authorized by resolution duly adopt he board, or the corporation has been	ed by its board of directors or by an off notified in writing of the change.	icer so		
Rich	ard & Fulmer	RICHARD S FULMER			
Signatu	re of an officer or director	Printed or typed name and title		·	
I further agree of my duties, ar document is bei	the appointment as registered agent of the comply with the provisions of all stand I am familiar with and accept the of ing filed merely to reflect a change in steen notified in writing of this chang	atutes relative to the proper and comple bligation of my position as registered a the registered office address, I hereby c	ete perfo gent. O onfirm	ormance r, if this that the	
Ton Ge	mu _	03/25/2022			
Sig	nature of Registered Agent	Date			
If signing on bo	chalf of an entity:				
Tom Glove	r				
Т	yped or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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