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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: BH MARTINS PAVERS INC

Name of Corporation

DOCUMENT NUMBER: P18000008014

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:

BRUNO MARTINS

Name of Contact Person

BH MARTINS PAVERS INC

Firm/Company

3831 NW 81ST TER

Address

CORAL SPRINGS FL 33065

City/State and Zip Code

MARTINSPAVING@HOTMAIL.COM

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

For further information concerning this matter, please call:

BRUNO MARTINS

,754 (367

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

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or registe	tized under the laws of the State of F	LORIDA
1. The name of t	he corporation: BH MARTINS PA	VERS INC	
2. The principal	office address: 3831 NW 81ST TE	ER, CORAL SPRINGS, F	L 33065
3. The mailing a	ddress (if different): SAME AS ABO	OVE	
4. Date of incorp	poration/qualification: 1/26/2018	Document number: P18000	0008014
	street address of the current registered a tment of State: (If resigned, enter resigne		h the
	RESIGNED		
	Kristin Martin	15	
6. The name and (if changed):	street address of the new registered ager	nt (if changed) and /or registered offi	F
	BRUNO MARTINS		FIL NOV 2 AHASS
	3831 NW 81ST TER		
	P.O. Box NOT CORAL SPRINGS FL 33065	•	FEOR STATE
The street addre	ss of its registered office and the street		07 10A
as changed will	be identical.		
authorized by th	s authorized by resolution duly adopted e board, or the corporation has been not	ified in writing of the change.	incer so
Signatur	e of an officer or director	BRUNO MARTINS, PRE	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm t	the appointment as registered agent and o comply with the provisions of all statu my duties, and I am familiar with and ac s document is being filed merely to refle that the corporation has been notified in	**	
721		// - 23 - /8	>
Sign	nature of Registered Agent	Date	
If signing on bel	nalf of an entity:		
Ту	ped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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