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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Haller Home Improvements Inc.

Name of Corporation

DOCUMENT NUMBER

P18000051895

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:

Ilene Tognini, Esq.

Name of Contact Person

Eques Law PA

Firm/Company

12161 Ken Adams Way STE 211

Address

Wellington/FL, 33414

City/State and Zip Code

ITognini@EquesLaw.us

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

For further information concerning this matter, please call:

llene Tognini, Esq.

,540 \687-5775

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, 617.0502, 607.1508, or 6 inge is submitted for a corporation organized under the la	ws of the State of	Florida
	r to change its registered office or registered agent, or hoot the corporation: Haller Home Improvements	•	Florida.
	office address: 107 Delwood Drive	<u> </u>	
	ee, FL 34744		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 06/08/2018 Document	number: P180	000051895
5. The name and	I street address of the current registered agent and registere timent of State: (If resigned, enter resigned)	ed office on file v	with the
	Mike Haller		_
	107 Delwood Drive		20
	Kissimmee, FL 34744		19 OC
6. The name and (if changed):	I street address of the new registered agent (if changed) an	d /or registered o	[ALL/小H: [856]]
	llene Tognini, Esq.	<u> </u>	<u> </u>
	12161 Ken Adams Way Ste 211		i on
	P.O. Box NOT acceptable Wellington, FL 33414	·	_
The street address changed will	ess of its registered office and the street address of the bube identical.	siness office of i	its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of due board, or the corporation has been notified in writing of	lirectors or by an of the change.	officer so
Miles	Haller PR		
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in to comply with the provisions of all statutes relative to th my duties, and I am familiar with and accept the obligat is document is being filed merely to reflect a change in the that the corporation has been notified in writing of this c	this capacity. this capacity. e proper and coi ion of my positio ne registered offi change.	
	nature of Registered Agent	1 - / 1 / 20	19_
Sign	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
Ty	sped 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 * * *