## P20000023653

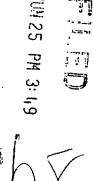
(Da.				
(Red	questor's Name)			
(Add	dress)			
(Add	dress)			
(City	y/State/Zip/Phon	e #)		
	_			
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Na	me)		
(Doc	cument Number	<del></del>		
•	•			
Cartified Conjes	Certificate	e of Statue		
Certified Copies Certificates of Status				
Special Instructions to f	Filing Officer:			

Office Use Only



000368926770

-06/25/21--01015--012 \*\*35.00



RARCICHS

JUL 227071 I ALBRITTON

## **COVER LETTER**

Amendment Section

TO:

SUBJECT: HARTS MAINTENANCE INC. Name of Corporation	
Name of Corporation	
DOCUMENT NUMBER: P20000023653	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
NICHOLAS HART	
Name of Contact Person	<del></del>
HARTS MAINTENANCE	
Firm/Company	
4952 VERDIS ST	
Address	
JACKSONVILLE FL 32258	
City/State and Zip Code	<del></del>
NICKHART90@GMAIL.CO	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter, p	please call:
NICHOLAS HART	at (904 )7628288  Area Code & Daytime Telephone Numb
Name of Contact Person	Area Code & Daytime Telephone Numb

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**Street Address:** 

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of ch	hange is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statute. rganized under the laws of the State of FLORII gistered agent, or both, in the State of Florida	DA
1. The name o	f the corporation: HARTS MAINTENA	NCE INC.	
2. The principa	al office address: 4952 VERDIS ST JAC	KSONVILLE FL 32258	
3. The mailing	g address (if different):		
4. Date of inco	orporation/qualification: 03-20-2020	Document number: P20000023653	
5. The name a		ed agent and registered office on file with the	
	INCFILE		26
	17350 STATE HWY 249 SUITE 220		121 J
	MOUSTON TV 77064		2021 JUN 25
6. The name a (if changed)	nd street address of the new registered	agent (if changed) and /or registered office	
	NICHOLAS W. HART		64
	4952 VERDIS ST		
	JACKSONVILLE FL 32258	). Box NOT acceptable	
The street add as changed wi	dress of its registered office and the still be identical.	reet address of the business office of its regis	tered agent,
Such change authorized by	was authorized by resolution duly ado the board, or the corporation has been	opted by its board of directors or by an office in notified in writing of the change.	r so
Nicho	las Hart sture of an officer or director	Nichelas Hart Printed or typed name and title	
		t and agree to act in this capacity. statutes relative to the proper and complete pobligation of my position as registered agen in the registered office address, I hereby conjuge.	performance t. Or if this Trm that the
Hicholas	Hast Signature of Registered Agent	06/22/2021 Date	
	Signature of Registered Agent behalf of an entity:	Date	
	Typed or Printed Name		
	* * * FILING	G FEE: \$35.00 * * *	

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