

P21 0000009961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

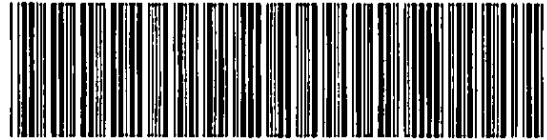
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TO: Amendment Section
Division of Corporations

SUBJECT: Rock Castle Roofing INC
Name of Corporation

DOCUMENT NUMBER: P21000009961

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:

Lu-Ann Teter
Name of Contact Person

Rock Castle Roofing, INC
Firm/Company

2841 YAMADA LN
Address

NORTH PORT, FL 34286
City/State and Zip Code

rockcastleroofing@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lu-Ann Teter at (941) 666-1900
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: Rock Castle Roofing INC
2. The principal office address: 2841 YAMADA LN
NORTH PORT FL 34286
3. The mailing address (if different): N/A
4. Date of incorporation/qualification: 1-25-21 Document number: Pa1000009961
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)

Alexander Khokhlan
2773 TRIANNA ST
NORTH PORT FL 34291

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

STEPAN SEIYUZHITSKIY
2841 YAMADA LN
NORTH PORT FL 34286

P.O. Box NOT acceptable

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.

Jeffrey W Lindsey
Signature of an officer or director

Jeffrey W Lindsey
Printed or typed name and title

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

Stepan Seiyuzhitskiy
Signature of Registered Agent

12-1-22
Date

If signing on behalf of an entity:

STEPAN SEIYUZHITSKIY
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

CR2E045 (04/13)

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