PRI 0000 4505

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. HORNE FEB - 3 2024				

Office Use Only



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01/08/24--01042--019 ***5.00



COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJ Name	ECT: Facility Pressure Washing Inc. of Corporation			
DOCU	JMENT NUMBER: P21000014508			
The er	nclosed Statement of Change of Registered Off	ice/Agent and fe	e are submitted for fil	ling.
Please	return all correspondence concerning this mat	ter to the followi	ng:	
	. Cronin of Contact Person			
Stanto	n Cronin Law Group, PL			
Firm/C	Company			
6944 V	V. Linebaugh Ave., Suite 102			
Addre	ss			
Tampa	a, Florida 33625			
City/S	tate and Zip Code			
	scronin@sclawyergroup.com			
E-mai	l address: (to be used for future annual rep	ort notification)	
For fu	rther information concerning this matter, pleas	e call:		
Sean F	P. Cronin	at (813	444-0155	
	Name of Contact Person	Area Co) 444-0155 ode & Daytime Telep	hone Number
Enclos	sed is a \$35.00 check made payable to the Dep			

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 cha	ange is submitted for a corporation organ	12, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Florida ered agent, or both, in the State of Florida.			
1. The name of	the corporation: Facility Pressure Washing	g Inc.			
	I office address: 2310 W. Kathleen Street				
	address (if different):				
Date of incor	rporation/qualification: 02/08/2021	Document number: P21000014508			
5. The name and		igent and registered office on file with the			
	Marleen Mary Geyen	\$2%			
	2310 W. Kathleen Street				
	Tampa, Florida 33607	7 - AM - 3			
6. The name and (if changed):	nd street address of the new registered age				
	Francisco Alvarez-Cortes				
	2310 W. Kathleen Street				
	P O Box NOT acceptable Tampa, Florida 33607				
The street addr	ress of its registered office and the street If be identical.	address of the business office of its registered agent,			
		d by its board of directors or by an officer so ottified in writing of the change.			
	(Mar)	Francisco Alvarez-Cortes, President			
Signati	tire of an officer or director	Printed or typed name and title			
I further agree of my duties, ar dociment is be	of the appointment as registered agent are to comply with the provisions of all stand all am familiar with and accept the objuing filed merely to reflect a change in the has been notified in writing of this change	tutes relative to the proper and complete performance ligation of my position as registered agent. Or, if this we registered office address, I hereby confirm that the '.			
	Ignature of Registered Agent	12/28/2023			
	ehalf of an entity:	rac.			
Francisco-Alvar	·				
	Typed or Printed Name				
	* * * FILING F	EE: \$35.00 * * *			