## P22 000006574

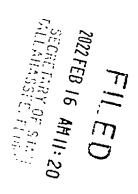
(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
J. HORN	E				
FEB 2 4 2022					

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## COVER LETTER

ΓO: An Di	nendment Section vision of Corporations	* *
•	·	•
·	SAVAZIR RINISHES INC	
SUBJECT	SAVAGE FINISHES INC orporation	
Name of C	Cip. Caucii	
DOCUME	NT NUMBER: P22000006574	
The enclos	ed Statement of Change of Registered	JOffice/Agent and fee are submitted for filing.
Please retu	rn all correspondence concerning this	matter to the following:
Brendan M	eCutcheon	
Name of C	ontact Person	
New Busin	ess Filing LLC	
Firm/Com	pany	
925 Congre	rss Park	
Address		
Dayton Of	1.45459	
City/State	and Zip Code	
	orders@newbusinessfiling.or	uf.
E-mail ad	dress: (to be used for future annua	report notification)
For further	r information concerning this matter, p	please call:
	Eric Polchies	407 640-0958
	Name of Contact Person	at ( 407 ) 640-0958 Area Code & Daytime Telephone Number
Enclosed i	s a \$35.00 check made payable to the	Department of State.
	• •	•
	Matthew Address	Street Address:
	Mailing Address: Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	inge is submitted for a corporation orgo	502, 607,1508, or 617,1508, Florida Statu anized under the laws of the State of <u>Flori</u> stered agent, or both, in the State of Floric	ida	<del></del>
		-		
<ul><li>1. The name of</li><li>2. The principal</li></ul>	the corporation: SAVAGE FINISHES E office address: 2591 W ORANGE BLOS	SSOM TRAIL APOPKA, FL 32712		<del></del>
3. The mailing a	address (if different): 27 PIEDMONT D	R PALM COAST, FL 32164		
4. Date of incorporation/qualification: 01/18/2022 Document number: P2200000657				
5. The name and		lagent and registered office on file with th		
	ERIC POLCHIES			
	2591 W ORANGE BLOSSOM TRAIL	>	<b>20</b> 7	
	APOPKA, FL 32712	보	2022 FEB 16 SECRETARY	-7
6. The name and (if changed):	d street address of the new registered ag	gent (if changed) and /or registered office		
	ERIC PÓLCHIES		AM II: 20 Of Sign	
	128 N FOUNTAIN DR		20	
		Box NOT acceptable		
	PIERSON, FL 32180			
The street addr	ess of its registered office and the stre- be identical.	et address of the business office of its reg	gistered as	gent.
Such change w authorized by t	as authorized by resolution duly adopt he board, or the corporation has been i	ted by its board of directors or by an office notified in writing of the change.	cer so	
	(6)2	ERIC POLCHIES PRESIDENT	r	
-	tre of an officer or director	Printed or typed name and fill:		
I hereby accept I further agree of my duties, an document is be corporation ha	the appointment as registered agent of to comply with the provisions of all st ad I am familiar with and accept the of ing filed merely to reflect a change in s been notified in writing of this chang	and agree to act in this capacity, attack relative to the proper and complet bligation of my position as registered ag the registered office address. I hereby coge.	e perform ent. Or i infirm tha	ignee I this it the
$H_{dZ}$		02/09/2022		
Sig	mature of Registered Agent	Date		
If signing on bo	chalf of an entity:			
· · · · · · · · · · · · · · · · · · ·	typed or Printed Name			