P23 000075-750

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)	.		
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



500433573885

07/31/24--01009--001 **35.00

7024 JUL 31 I.Y 9: 2

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: 282 Build, Inc.				
Name of Corporation				
P23000075750 DOCUMENT NUMBER:				
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:			
R. Allan Lougheed				
Name of Contact Person				
282 Build, Inc.				
Firm/Company				
17608 Deer Isle Circle				
Address		702		
Winter Garden, FL 34787		2024 3.11.		
City/State and Zip Code		1 ===		
Allan,282Build@Gmail.com		ري.		
E-mail address: (to be used for future annual	report notification)			
		بر. دن		
For further information concerning this matter, p	olease call:	9:27		
R. Allan Lougheed	321 229-0400			
Name of Contact Person	at (321) 229-0400 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	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

CR2E045 (04-13)

$\mbox{\tt .3TATEMENT}$ OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation or	0502, 607,1508, or 617,1508, Florida Statutes, this ganized under the laws of the State of Florida	-
		gistered agent, or both, in the State of Florida.	
1. The name of t	he corporation: 282 Build, Inc.		_
2. The principal Winter Garden, F	office address: 17608 Deer Isle Circle L 34787		_
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 10/25/23	Document number: P23000075750	
	street address of the current register tment of State: (If resigned, enter res	ed agent and registered office on file with the igned)	
	Registered Agents Inc.		
	7901 4th St N Ste 300		
	St. Petersburg, FL 33702	2024	
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or registered office	
	R. Allan Lougheed		
	17608 Deer Isle Circle	9; 22	
	P.(D. Box NOT acceptable	
	Winter Garden, FL 34787		
The street addre	ess of its registered office and the st be identical.	reet address of the business office of its registered agen	ıt,
Such change was authorized by	is authorized by resolution duly ade the board or the corporation has been	opted by its board of directors or by an officer so notified in writing of the change.	
Mili		R. Allan Lougheed President	_
Signadi	of an officer or director	Printed or typed name and title	
I furthér agrée t of my duties, an document is bei	the appointment as registered agen to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change i been unfilled in writing of this cha	statutes relative to the proper and complete performan obligation of my position as registered agent. Or, if the in the registered office address, I hereby confirm that the	ce us ie
Allin		R. Allan Lougheed 7/22/24	
Sign	nature of Registered Agent	Date	•
If signing on be	half of an entity:		
	yped or Printed Name		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl. 32314 CR2E045 (04/13)

* * * FILING FEE: \$35.00 * * *