P94000004911

(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
•		
(Bu	siness Entity Nam	e)
·	•	
(Do	cument Number)	
•	,	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700266183097

700266183097 11/06/14--01015--004 **35.00

> SECRETARY OF STATE ALLAHASSEE, FLORIDA

14 NOV -6 AM 5: 03



COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: HAMIS & ASSOC PAINTING INC. Name of Corporation			
DOCUMENT NUMBER: \$940000 4911			
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:			
Doug Haras Name of Contact Person			
Firm/Company			
P. O. Box 1960			
FT. WACTON BOU FL 32549 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (850) 759 - 2683 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 Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: HARRIS & ASSOZ PAINTING INC
2. The principal office address: 4207 INDIAN BAYOU TRUC
3. The mailing address (if different): Property 1960 FT: WALTON BOA FC 32549
4. Date of incorporation/qualification: 1/10/94 Document number: P9400000 491/
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)
BRONDA W. HARRIS
1234 ALPPORT RD
DESON FC 37541
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Brings W. Harras Land For Many Companies of the new registered agent (if changed) and /or registered office (if changed): Brings W. Harras P.O. Box NOT acceptable DESTAN R. 32541
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.
Signature of an officer or director 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. Signature of Registered Agent If signing on behalf of an entity:
Tyrad or Printed Name

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