

P94000020081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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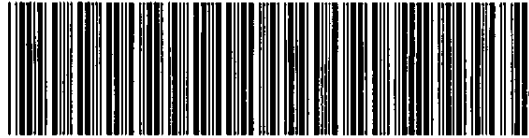
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 JAN 25 12 11:49

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2016 JAN 27 10:03  
K. A. [Signature]

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Stolze Door Company

Name of Corporation

**DOCUMENT NUMBER:** P94000020084 /G 00137900083

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:

Gloria McCloskey

CK 57469 35.00

Name of Contact Person

Stolze door company/OVERHEAD DOOR OF CLEARWATER

Firm/Company

12855-a Daniels Dr

Address

Clearwater, fl 33762

City/State and Zip Code

gloria@overheadclw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

gloria mccloskey

Name of Contact Person

at ( 727 ) 524-1000

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: stolze door company DBA OVERHEAD DOOR OF CLEARWATER  
2. The principal office address: 12855-a daniels drive  
clearwater, fl 33762  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 03/1994 Document number: p9400020084

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)

john l stolze

312 bell isle

bellair beach, fl 33786

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

Jack G McCloskey

5933 140th terr n

P.O. Box NOT acceptable

clearwater, fl 33760

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

Jack G McCloskey

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.*

  
Signature of Registered Agent

01/21/16

Date

If signing on behalf of an entity:

Jack G. McCloskey

Typed or Printed Name

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