

P97000048381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

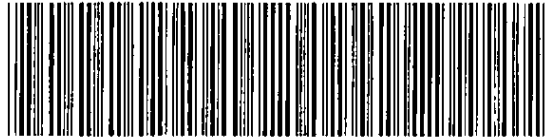
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000411673210

07/07/23--01012--006 **35.00

FILED
2023 JUL -7 PM 3:11
COURT CLERK'S OFFICE
JULY 7 2023

Ra Chang

AUG 16 2023

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PLB FLORIDA INC
Name of Corporation

DOCUMENT NUMBER: P97000048381

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:

DEEDEE KAH

Name of Contact Person

Firm/Company

21338 LAKE VIENNA DR

Address

LAND O LAKES, FL 34638

City/State and Zip Code

dkah@carrollwoodwindow-door.com

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

For further information concerning this matter, please call:

DEEDEE KAH

Name of Contact Person

at (813)

748-5449

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 JUL -7 PM 3:11

FILED

**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: PLB FLORIDA INC
2. The principal office address: 21338 LAKE VIENNA DR LAND O LAKES FL 34638
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/26/1997 Document number: P97000048381
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)

RICK W SADORF

1744 N BELCHER ROAD SUITE 150

CLEARWATER, FL 33765

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

DANIEL L MOODY ESQ

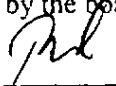
1221 13TH COURT SW

P.O. Box NOT acceptable

LARGO, FL 33779-0034

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

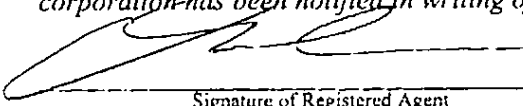
RANDY KAH

Printed or typed name and title

6/19/2023

PRESIDENT

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

6/19/23
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)