

P98 0000 33336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Precision Wallboard of Polk County, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P98000033336

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rebecca DeZarn

(Name of Person)

Precision Wallboard of Polk County, Inc.

(Name of Firm/Company)

P.O. Box 2492

(Address)

Eaton Park, FL 33813

(City/State and Zip Code)

For further information concerning this matter, please call:

Rebecca DeZarn

863

669 - 9460

(Name of Person)

at (

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida 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

**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: Precision Wallboard of Polk County, Inc.
2. The principal office address: P.O. Box 2492
Lakeland, FL 33813
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/28/2021 Document number: P98000033336
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)

Michael W. DeZarn

3375 US Hwy. 98 South, Bldg. B, Suite #1

Lakeland, FL 338032

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

Rebecca DeZarn

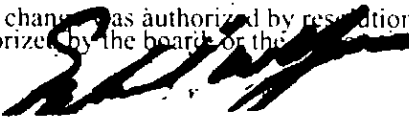
3375 US Hwy. 98 South, Bldg. B, Suite #1

P.O. Box NOT acceptable

Lakeland, FL 33803

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 officer. The officer has been notified in writing of the change.



Signature of an officer or director

Michael W. DeZarn

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.

Rebecca DeZarn

Signature of Registered Agent

August 16 2021

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)

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TALLAHASSEE, FL