(Requestor's Name) (Address) (Address)	100315031791
(City/State/Zip/Phone #)	06/28/1601011013 ++35.00
Certified Copies Certificates of Status	Machy Machy

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Spring Hill Printing Plus, Inc.

Name of Corporation

S12435 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:

Kelly Love		
Name of Contact Person		
Spring Hill Printing Plus, Inc.		
Firm/Company		
11063 Hearth Road		
Address		
Spring Hill, Florida 34608		
City State and Zip Code		

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

For further information concerning this matter, please call:

Kelly Love

Name of Contact Person

at (<u>352</u>)<u>688-5203</u> 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

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

 The name The princ 	e of the corporation: Spring Hill Printing Plus, Inc. cipal office address: 11063 Hearth Road, Spring Hill, Florida 3460)8	
3. The mail	ing address (if different):		
4. Date of it	ncorporation/qualification: 11/13/1990 Document number: S12435		
	e and street address of the current registered agent and registered office on file with Department of State: (If resigned, enter resigned)	the	
	Roy G. W. Love		
	1326 Bentley Ave.		
	Spring Hill, Florida 34608		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Keliy Love		
	11063 Hearth Road		
	P.O. Box NOT acceptable Spring Hill, Florida 34608		

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.

Deel an officer or director Signature

President and Director

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 dutics, 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.

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If signing on behalf of an entity:

Kelly Love

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 (r2E045 (03.12)