

S27755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

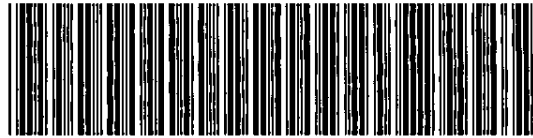
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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AND  
FILED

*[Handwritten Signature]*

NOV 16 2014  
T. LEMIEUX

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: HAWKEYE CONSTRUCTION OF SOUTH FLORIDA  
Name of Corporation INC.

DOCUMENT NUMBER: S27755

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:

ANDRU RAMIKER

Name of Contact Person

HAWKEYE CONSTRUCTION OF SOUTH FLORIDA INC  
Firm/Company

905 HARBOUR LAKE DRIVE #9  
Address

SAFETY HARBOUR, FLA 34695  
City/State and Zip Code

aramiker@hawkeye-1.com

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

For further information concerning this matter, please call:

ANDRU RAMIKER

Name of Contact Person

at ( 239 ) 980 9760  
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: HAWKEYE CONSTRUCTION OF SOUTH FLORIDA INC  
2. The principal office address: 985 HARBOR LAKE DRIVE #9  
SAFETY HARBOR, FLORIDA 34695  
3. The mailing address (if different): SAME  
4. Date of incorporation/qualification: 1/28/91 Document number: S 27755

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)

SIMEONE RICHARD J  
4411 CLEVELAND AVE  
FT. MYERS, FLORIDA 3390

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TALLAHASSEE, FLORIDA

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

ANDRU RAMKER  
985 HARBOR LAKE DRIVE  
P.O. Box NOT acceptable  
SAFETY HARBOR, FLORIDA 34695

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]  
Signature of an officer or director

ANDRU RAMKER, PRESIDENT  
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]  
Signature of Registered Agent

10.21.2014  
Date

If signing on behalf of an entity:

ANDRU RAMKER  
Typed or Printed Name

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