

V15932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certificates of Status _____

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DLB Painting, Inc.
(Name of corporation)

DOCUMENT NUMBER: V15932

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:

Dennis Braland
(Name of person)

DLB Painting, Inc.
(Name of firm/company)

5634 Marys Villa Road
(Address)

Groveland, FL 32744
(City/state and zip code)

For further information concerning this matter, please call:

Dennis Braland at 352-429-4012
(Name of person) (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
409 E. Gaines Street
Tallahassee, FL 32399
CR2E045(C7/02)

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

Pursuant to the provisions of sections 607.0502, 6.17.0502, 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: DLB Painting, Inc.
2. The principal office address: 5634 Mary's Villa Rd., Groveland, FL 34736
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/21/92

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5. The name and street address of the current registered agent and registered office on file with, the Florida Department of State:

Harry J. Swart
717 East Oak Street
Kissimmee, FL 34744

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

Dennis Braland
5634 Marys Villa Road
Groveland, FL 34736
(P.O. Box or personal mailbox **NOT** acceptable)

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TALLAHASSEE, FLORIDA

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.

Leatha Braland
(Signature of an officer, chairman or vice chairman of the board)

Leatha Braland vice-pres.
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. 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.

Leatha Braland
(Signature of Registered Agent)

12-3-04
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314