## FU7000001519

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2022 APR 18 EM 9: 4.1

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CORPORATION SERVICE COMPANY 1201 Hays Street

CONTACT PERSON: Alexxis Weiland

Tallhassee, FL 32301 Phone: 850-558-1500



EXAMINER'S INITIALS:

Phone: 850-558-1500				date as file date					
		ACCOUI	NT NO.	: I20	0000001	195			
		REFI	ERENCE	: 622	288	8374290			
		AUTHORI	ZATION _	Louis	Elem	<b>a</b> . )			
		COST	LIMIT	\$ 30	5.00				-
ORDER D	ATE :	April 14,	2022						
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		<u>CHANC</u>	GE OF AGI	ENT					
;	NAME :	EMERALI	) CONTRAC	CTING	CORP		DIVISION OF CORPOR TALLAHASSEE. FL	2022 APR 20 PM	XECEIVED
PLEASE	RETURN	THE FOLLOW	VING AS 1	PROOF	OF FILI	ING:	RATIONS ORIDA	3: <b>2</b>	נים
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April 20, 2022

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Please give original submission date as file date.

SUBJECT: EMERALD CONTRACTING CORP

Ref. Number: F07000001519

We have received your document for EMERALD CONTRACTING CORP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file is \$35.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder Regulatory Specialist III

Letter Number: 122A00009197

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

statement of cha	inge is submitted for a corpo	1502, 617.0502, 607.1508, or 61 pration organized under the law	s of the State of _	New Jersey	
	the corporation: EMERALD	fice or registered agent, or both CONTRACTING CORP	i, in the State of F	ʻlorida.	
		n Błvd. Building L Warren, NJ (	7059		<del></del>
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: <u>04/</u>	19/2007 Document n	umber: <u>F0700</u>	00001519	
	I street address of the curren tment of State: (If resigned,	at registered agent and registered enter resigned)	l office on file wi	th the	
	NRAI SERVICES, INC				
	1200 South Pine Island R	load		-	~ >
	Plantation	FL	33324	_ - 살목	 1022 A.
6. The name and (if changed):	I street address of the new re	egistered agent (if changed) and	/or registered off	fice	1072 APR 1 B
	Corporation Service Com	pany			· · · · · · · · · · · · · · · · · · ·
	1201 Hays Street	-		-	
		P.O. Box NOT acceptable			-
	Tallahassee	FL	32301	-	
The street addre as changed will	ss of its registered office ar be identical.	nd the street address of the bus	iness office of its	s registered	agent,
Such change wa authorized by th	s authorized by resolution e board, or the corporation	duly adopted by its board of di has been notified in writing of	rectors or by an the change.	officer so	
John Howsth		John Horvath	_	Vice President	
I hereby accept I further agree to of my duties, an document is bein corporation has Corporatior By:	been notified in writing of Service Company  atture of Registered Agent	red agent and agree to act in the ns of all statutes relative to the scept the obligation of my posit change in the registered office	or typed name and tit his capacity, proper and com ion as registered address, I hereb Date	inlata navfo	rmance ; if this hat the
Grace E. Kirby, A	Asst. Vice President				
	ped or Printed Name	<del></del>			

\* \* \* 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)