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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195 Phone

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Fax Number

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Email	Address:
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## REGISTERED AGENT CHANGE PATRICK INDUSTRIES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

JAN 1 3 2010

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

statement of cha	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organiz r to change its registered office or register	ed under the laws of the State of Indian	na
		,	i.
	he corporation: PATRICK INDUSTRI office address: 107 W. Franklin St., Ell		· · · · · · · · · · · · · · · · · · ·
z. The principal	ornice address:		
3. The mailing a	ddress (if different): P O Box 638, 107 V	W. Franklin St., Elkhart, IN 46515-	0638
4. Date of incon	poration/qualification: 04/30/1969	Document number: 822718	
	street address of the current registered age timent of State:	ent and registered office on file with the	
	Chuck Hardyman		
	107 S.W. 17th Street		<b>3</b> 6
	Ocala, FL 34474		
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office	O JAN 12 PM 12: 0
	Corporation Service Company		
	1201 Hays Street	- · · · · · · · · · · · · · · · · · · ·	
	(P.O. Box NOT acceptable)		は対し
	Tallahassee, FL 32301		
The street address changed will	ss of its registered office and the street a be identical.	ddress of the business office of its regis	stered agent,
Such change wa authorized by th	s authorized by resolution duly adopted to board, or the corporation has been noti	by its board of directors or by an office fied in writing of the change.	er so
•	20-	Andy L. Nemeth, Excc V.P. Finan	ace
	re of an officer or director)	(Printed or typed name and title)	·····
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent and o comply with the provisions of all statut d I am familiar with and accept the oblig ng filed merely to reflect a change in the been notified in writing of this change. on Service Company	agree to act in this capacity, es relative to the proper and complete atton of my position as registered ager registered office address, I hereby con	performance nt. Or, if this firm that the
		1-12-2010	
7 (Sig	nature of Registered Agent)	(Date)	
If signing on be	half of an entity:		
Sylvia Queppe	et, Asst. Vice President		
ח	ypod 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 CR28045 (8/05)