## F9700000 1185

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
•		

Office Use Only



200239374422



FILED 12 SEP 20 PHIE: 53





CORPORATION, SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE: 344256

7895303

AUTHORIZATION :

COST LIMIT :

ORDER DATE: September 12, 2012

ORDER TIME : 9:57 AM

ORDER NO. : 344256-022

CUSTOMER NO: 7895303

## CHANGE OF AGENT

NAME:

BELDON ROOFING & REMODELING

CO.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.05 nge is submitted for a corporation orgo r to change its registered office or regis	nnized under the laws of the State of	Texas
1. The name of t	he corporation: BELDON ROOFIN	G & REMODELING CO.	
	office address: 5039 West Avenue, S		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 03/07/1997	Document number: F97000	0001185
	I street address of the current registered tment of State:	agent and registered office on file w	ith the
	C T Corporation System		
	1200 South Pine Island Road		72 T
	Plantation, FL 33324 US		SEP 20
6. The name and (if changed):	street address of the new registered ag	ent (if changed) and /or registered of	?m≺ ••••
	Corporation Service Company		ORIE 5
	1201 Hays Street		<b>→</b>
	(P.O. Box NOT acceptab	le)	
	Tallahassee, FL 32301		<del></del>
_	ess of its registered office and the stree be identical.		
Such change wa authorized by the	as authorized by resolution duly adopt ne board, or the corporation has been i	ed by its board of directors or by an notified in writing of the change.	n officer so
Mar. Signatur	we of an officer or director)	Maureen Cathell, Vice Presi	
I further agree of my duties, an document is bei corporation has	the appointment as registered agent a to comply with the provisions of all sta d I am familiar with and accept the of ng filed merely to reflect a change in s been notified in writing of this chang on Service Company	ind agree to act in this capacity. Itutes relative to the proper and co bligation of my position as register the registered office address, I here ie.	mplete performance ed agent. Or, if this eby confirm that the
Bv:	1.	9-13-2017 (Date)	2
	dature of Registered Agent)	(Date)	
If signing on be	half of an entity:		
	et, Asst. Vice President		
(1	Typed or Printed Name)		

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

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