

P95000014684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

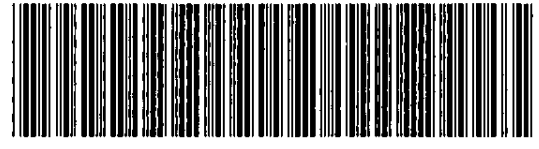
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Third Generation Plumbing and Mechanical Co., Inc.
Name of Corporation

DOCUMENT NUMBER: P95000014684

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:

Travis Fulford
Name of Contact Person

Wright, Fulford, Moorhead & Brown, P.A.
Firm/Company

505 Maitland Avenue, Suite 1000
Address

Altamonte Springs, Florida 32701
City/State and Zip Code

twfulford@wfmblaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Travis Fulford at (407) 425-0234
Name of Contact 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
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: Third Generation Plumbing and Mechanical Co., Inc.

2. The principal office address: 12608 Henderson Road
Tampa, Florida 33625

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 2/20/1995 Document number: P95000014684

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)

Travis Fulford / wright, Fulford, Moorhead + Brown
145 North Magholia Avenue
Orlando, Florida 32801

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

Travis W. Fulford
505 Maitland Avenue, Suite 1000
P.O. Box NOT acceptable
Altamonte Springs, Florida 32701

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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 of an officer or director

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 of Registered Agent

10/14/11
Date

If signing on behalf of an entity:

Travis Fulford
Typed 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