| | | | ocitificate of otatus besileu. No | |
|--|--|-----------------|-----------------------------------|------------|
| Name and Address of Current Registered Agent: | | | | |
| LOBO, JESUS 1759 FLOURISH KISSIMMEE, FL | | | | |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. | | | | |
| SIGNATURE | : JESUS LOBO | | | 04/20/2023 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | Р | Title | VP | |
| Name | LOBO, JESUS | Name | GONZALEZ, JOSE | |
| Address | 1759 FLOURISH AVE | Address | 1025 LA MIRADA CT | |
| City-State-Zip: | KISSIMMEE FL 34744 | City-State-Zip: | KISSIMMEE FL 34744 | |
| | | | | |
| | | | | |

1025 LA MIRADA CT KISSIMMEE, FL 34744

Current Mailing Address:

FEI Number: 87-0889821

Ν

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Ρ

SIGNATURE: JESUS LOBO

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

04/20/2023 Date

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000050239

Entity Name: SKY FOAM INSULATION CORP

Current Principal Place of Business:

1025 LA MIRADA CT KISSIMMEE, FL 34744