Maling Address 15 N GRANGE MENUE RECH COVE SPRINGS FL 32043 2. Principal Place of Business Suite, Apt. #, etc. City & State C	1. Entity Name BROWN AND CARTWRIGHT ACE HAP	RDWARE, INC.		FILED Jan 08, 2001 8:00 am Secretary of State	
Sulle, Apt. #, etc. Sulle, Apt. #, etc. DO NOT WHITE IN THIS SPACE	15 N ORANGE AVENUE	115 N ORANGE AVENUE	13		
City & State City & State City & State City & State Country City FL City FL City City City FL City City City FL City City City City FL City Cit	2. Principal Place of Business	3. Mailing Address] [00] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1	
Zip — Country Zip — Country 5. Certificate of Status Desired \$8.75. Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CARTWRIGHT, MILFORD M 115 N ORANGE AVE GREEN COVE SPRINGS, FL FL City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Signature, types or printed name of registered agent and late 4 applicable (NOTE: Registered Agent signature required when reinstating) P. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Address in Trust Fund Contribution. DATE P. This proposed registered Agent signature required when reinstating) DATE 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE NAME STREET ADDRESS CITY-ST-ZIP TILE Detele TILE Opelet TILE O	Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
Second control Seco	City & State	City & State		33 1004042	
CARTWRIGHT, MILFORD M 115 N ORANGE AVE GREEN COVE SPRINGS, FL FL City City FL Zip Code 8. The above named entity submits this statement for the purpose of changing lis registered office or registered agent, or both, in the State of Florida. SIGNATURE 9. This corporation is eligible to satisfy its intangible Tax liting requirement and elects to do so. (See criteria on back) OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS IN 11 TILE NAME SIRET ADDRESS OITY-ST-ZIP TILE OITH NAME SIRET ADDRESS OITY-ST-ZIP TILE OITH Addition	Zip ————————————————————————————————————	Zip C	Country	5 Certificate of Status Desired \$8.75 Additional	
CARTWRIGHT, MILFORD M 115 N ORANGE AVE GREEN COVE SPRINGS, FL FL City FL Zip Code	6. Name and Address of Current F	Registered Agent	Nessa	7. Name and Address of New Registered Agent	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or primed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 (See criteria on back) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME SIREET ADDRESS GITY-ST-ZIP TITLE NAME SIREET ADDRESS GITY-ST-ZIP Delete TITLE Change Addition AAG Addition AAG ADDITIONS/CHANGES CITY-ST-ZIP Change Addition AAG Addition AAG ADDITIONS/CHANGES CITY-ST-ZIP Change ADDITIONS/CHANGES CITY-ST-ZIP Change ADDITIONS/CHANGES CITY-ST-ZIP Change ADDITIONS/CHANGES CITY-ST-ZIP Change ADDITIONS/CHANGES CITY-ST-Z	115 N ORANGE AVE			(P.O. Box Number is Not Acceptable)	
8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent alignature required when reinstalling) DATE			City	FL Zip Code	
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904-284-9931 Daytime Phone #

TURE AND TYPED OR PRINTED NAME OF SIGNING AFFICER OR DIRECTOR