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SECRETARY OF SINITE SIGN OF CORPORATIONS

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OF APR 14 PM 3:478

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: GR Hammonds Roofing, INC. (Name of Corporation)
DOCUMENT NUMBER: F D 1 0 0 0 0 0 0 1 5 9
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:
Anita H. Blanks (Name of Contact Person)
6R Hammonds Roofing, INC.
POBOX 101 (Address)
Lumberton NC 28359 (City/State and Zip Code)
For further information concerning this matter, please call:
Anita H. Blanks at (910) 618-9935 (Area Code & Daytime Telephone Number)
England is a \$25.00 about made mayable to the Denoutment of State

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 in order to change its registered office or registered agent, or both, in the State of Florida.
in order to change its registered office of registered agent, or both, in the state of rior add.
1. The name of the corporation: Care Itammonas Rooting, Lac.
2. The principal office address: 159 Shanon Road
Lumberton, Mr. 08360
3. The mailing address (if different): PO BOX 100 Lumberton, NC 3835
4. Date of incorporation/qualification: 4-25-97 Document number: C-0430598
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: Douglas D. Hammond
Douglas D. Harritota
1463 Lloyds Cove Koad
Tallahassee, Florida 32312
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Will Dtis Hammond
4675 SW 82 Terrare 5
Davie, Florida 33328
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 phart, or the corporation has been notified in writing of the change.
Challet Blanks fresident
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 peen notified in writing of this change.
(Signature of Degistered Agent) 3-30-06 (Date)
If signing on behalf of an entity:
77 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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