UU00247Page 16f1

Florida Department of State

Division of Corporations Public Access System

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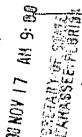
: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

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REGISTERED AGENT CHANGE

VAN'S COMFORTEMP AIR CONDITIONING, INC. .

| Certificate of Status | O |
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Corporate Filing Menu

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11/17/2008

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

| statement of ch | ange is submitted for a co | 7.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this rporation organized under the laws of the State of Delaware of Octowers of the State of Plorida. |
|--|---|--|
| 1. The name of | the corporation: Van's Con | mfortemp Air Conditioning, Inc. |
| 2. The principal DAYTON O | l office address; 7813 N. E H 45414 US | DIXIE DR. |
| 3. The mailing WESTON FI | · | EXECUTIVE PARK DRIVE, SUITE 4 |
| 4. Date of incom | poration/qualification: 05. | /16/2003 Document number: F03000002477 |
| 5. The name an | | cent registered agent and registered office on file with the |
| | NRAI Services, Inc. | |
| | 2731 Executive Park Driv | · 1 . 12 |
| | Weston, FL 33331 | |
| 6. The name an (if changed): | d street address of the new | registered agent (if changed) and /or registered office |
| | | CT Corporation System |
| | c/o C T Corpar | ration System, 1200 South Pine Island Road |
| | (P.O. Box NOT acceptable) Plantation, Florida 33324 | |
| | | Figuration, Figures 35524 |
| The street address changed will | ess of its registered office be identical. | and the street address of the business office of its registered agent, |
| Such change wa authorized by the | as authorized by resolution the board, or the corporation | on duly adopted by its board of directors or by an officer so on has been notified in writing of the change. |
| 11/ | 194 | Mark S Eppley, Attorney in fact for Brandon Parent, Director |
| | of any of the contractor | [Printed or typed above grid litte) |
| ferther agree t of my duties, an locument is bell corporation has | the appointment as regis to comply with the provisi of I am familiar with and ng filed merely to reflect been notified in writing of QT Consoration System | tered agent and agree to act in this capacity. ions of all statutes relative to the proper and complete performance accept the obligation of my position as registered agent. Or, if this a change in the registered office address, I hereby confirm that the of this change. |
| 3y: // | y Copporation System | November 13, 2008 |
| | half of an epithey | (Dute) |
| | seistant Vice-President | <u>.</u> |
| (T | yped of 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
CR2E045 (8/05)