F04000004995

(Re	questor's Name)	
(Ad	dress)		—
(Ad	dress)		
(Cit	y/State/Zip/Phor	ne #)	
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T. Roberts CEP N 6 280

COVER LETTER

SUBJECT: QUALITY AIR TOOL REPAIR, INC
(Name of Corporation)
DOCUMENT NUMBER: F04000004995
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:
ROBIN K. GALLOWAY (Name of Contact Person)
QUALITY AIR TOOL REPAIR, INC (Firm/Company)
1800 N CASHUA DRIVE (Address)
FLORENCE,S.C. 29501-1308 (City/State and Zip Code)
For further information concerning this matter, please call:
ROBIN K. GALLOWAY at (843) 665-6800 X102 (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

TO:

Amendment Section

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, the statement of change is submitted for a corporation organized under the laws of the State of SC	uis ————
1. The name of the corporation: QUALITY AIR TOOL REPAIR, INC	
2. The principal office address: 300-322 NORTHSTAR COURT UNIT 314	
SANFORD, FL. 32771	5 6 m
3. The mailing address (if different): 1800 N CASHUA DRIVE	<u> </u>
FLORENCE,S.C. 29501-1308	707 0
4. Date of incorporation/qualification: $\mathbf{\nabla} - 25 - 0\mathbf{Y}$ Document number: F04000004995	mo 3
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	FLORIE .
FRANK FLINT	7
240 POWER COURT STE 140	
SANFORD, FL. 32771	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	* •0 **
FRANK FLINT	3 - 4
300-322 NORTHSTAR COURT UNIT 314	
(P.O. Box NOT acceptable) SANFORD, FL. 32771	
The street address of its registered office and the street address of the business office of its registere as changed will be identical.	ed agent,
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.)
JACKIE G. GODFREY, JR. VICE-PRE (Senature of an officer or director) (Printed or typed name and title)	SIDENT
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 per of my duties, and I am familiar with and accept the obligation of my position as registered agent, document is being filed merely to reflect a change in the registered office address, I hereby confirm corporation has been notified in writing of this change.	formance Or, if this 1 that the
(Signature of Registered Agent) (Date)	 ,
If signing on behalf of an entity:	
FKANK Plint (Typed or Printed Name)	, .

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 * * *