

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000024812 3)))



H140000248123ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.****

Email Address: _____

2014 JAN 31 AM 11:42
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

14 JAN 31 PM 12:37

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
CUSTOM BUILDING PRODUCTS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

DR
2/3/14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CUSTOM BUILDING PRODUCTS, INC.

Name of Corporation

DOCUMENT NUMBER: F05000003563

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:

Robb Sundmaker
Name of Contact Person

Custom Building Products
Firm/Company

3490 Piedmont Rd Ste 1300
Address

Atlanta GA 30305
City/State and Zip Code

rsundmaker@quikrete.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robb Sundmaker at (404) 634-9100
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

CR2B045 (03/12)

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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CUSTOM BUILDING PRODUCTS, INC.
2. The principal office address: 13001 SEAL BEACH BLVD., SECOND FLOOR SEAL BEACH, CA 90740
3. The mailing address (if different): 13001 SEAL BEACH BLVD., SECOND FLOOR SEAL BEACH, CA 90740
4. Date of incorporation/qualification: 06/17/2005 Document number: F05000003563
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

NRAI SERVICES, INC.

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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 board, or the corporation has been notified in writing of the change.

Signature of an officer or director

David Jones, Chief Financial Officer

Printed or typed name and title

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 been notified in writing of this change.

By: Signature of Registered Agent

Signature of Registered Agent

1-29-14

Date

If signing on behalf of an entity:

Samantha Jones
Assistant Secretary

Typed or 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 (03/12)

FILED

2014 JAN 31 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA