

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.

(((H20000014941 3)))



H200000149413ABCV

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

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

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

Email Address:	
----------------	--

REGISTERED AGENT CHANGE

BRAZOS ROOFING INTERNATIONAL OF SOUTH DAKOTA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

O SIMMONS

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

. .

	•	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of South Dakota	
-		registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: BRAZOS ROOFIN	G INTERNATIONAL OF SOUTH DAKOTA, INC.	
		CO, TX 76701	
3. The mailing a	ddress (if different):		
4. Date of incoη	poration/qualification: 02/23/2006	Document number: <u>F06000001140</u>	
	I street address of the current registentent of State: (If resigned, enter n	ered agent and registered office on file with the esigned)	
	IST UNITED CRS, LLC		
	4211 CAPITAL CIRCLE NW		
	TALLAHASSEE, FL 32303		
6. The name and (if changed):	d street address of the new registere	d agent (if changed) and /or registered office TALLAHASSEE, FL P.O. Box NOT acceptable	
	Registered Agents Inc.	AHATTA ANTA	
	7901 4th St N STE 300	SSSV O	9
		P.O. Box NOT acceptable	ŗ
	St. Petersburg, FL 33702	F_AT	•
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered agent,	
Such change wa authorized by th	as authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
Steve	n Smith	Steven Smith, Chairman	
Signatu	re of an officer or director	Printed or typed name and title	
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of a ad I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	ent and agree to act in this capacity. Il statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this is in the registered office address, I hereby confirm that the hange.	
Be	& Have	1/14/20	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Bill Havre, Presi	dent		
T	yped 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 (04/13)