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(Per	questor's Name)	· · · · · · · · · · · · · · · · · · ·			
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PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to F	Filing Officer:				
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Office Use Only



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JUN 2 7 2012 T. ROBERTS

VIA US MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: J. WAYNE POOLE, INC.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

Ryan Ermis

REGISTERED AGENT SOLUTIONS, INC.

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

statement of cha	nnge is submitted for a co	rporation organize	507.1508, or 617.1508, Floi d under the laws of the State d agent, or both, in the State	e of		
1. The name of	the corporation: J. WA	YNE POOLE	, INC.	·		
2. The principal	office address: 3410 H	OLTS CHAPEL	ROAD, GREENSBO	RO NC 27401		
3. The mailing a	address (if different): PO	ST OFFICE BO	OX 21565, GREENSB	ORO NC 27420-1565		
4. Date of incorp	poration/qualification;	03/20/2007	Document number:	F07000001546		
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)						
	C T CORPORATIO	N SYSTEM	· · · · · · · · · · · · · · · · · · ·			
	1200 SOUTH PINE	ISLAND ROAL	D	TO COLOR WAR		
	PLANTATION FL 3	3324 US				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	Registered Agent Solutions, Inc.					
	155 Office Plaza Dr., Suite A					
	P.O. Box NOT acceptable Tallahassee, FL 32301					
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 wanthorized by the	as authorized by resoluti he board, or the corporat	on duly adopted by ion has been notifi	y its board of directors or lied in writing of the chang	by an officer so e.		
Cure	Signification of an officer or director Elizabeth Poole, Secretary Printed or typed name and title					
I further agree of my duties, ar document is he	the appointment as regi to comply with the provi ad I am familiar with and ing filed merely to reflec s been notified in writing	sions of all statute d accept the obliga t a change in the r	igree to act in this capacity s relative to the proper an ition of my position as regi egistered office address, I	y. d complete performance stered agent. Or, if this hereby confirm that the		
Signature of Registered Agent Le / 19/20/2 Date						
If signing on be	chalf of an entity:					
	res, Assistant Secret Typed or Printed Name	ary				

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