F10000001031

| (Re | equestor's Name) | | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
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| Certified Copies | _ Certificate: | s of Status | | |
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| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE
TALL ANASSEE, FLORIDA

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COVER LETTER

| TO: Amendment Section Division of Corporations | | | | |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| SUBJECT: SCI FLOORS, INC. (Name of Corpor | ation) | | | |
| DOCUMENT NUMBER: F10000001031 | | | | |
| 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: | | | | |
| Wendi M. Cook | · | | | |
| (Name of Contact | Person) | | | |
| National Registered Agents, Inc. | | | | |
| (Firm/Company) | | | | |
| 11600 College Boulevard, Suite 210 (Address) | | | | |
| · | | | | |
| Overland Park, KS 66210 | | | | |
| (City/State and Zip Code) | | | | |
| For further information concerning this matter, please call: | | | | |
| Wendi M. Cook at (Name of Contact Person) | (800) 550-6724 (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 | | | |

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

| statement of cha | provisions of sections 607.0302, 617.030 ange is submitted for a corporation organ er to change its registered office or regist | nized under the laws of the State of _ | North Dakota |
|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| | the corporation: | SCI FLOORS, INC. | |
| | office address: 5540 BUZZIE LN MIDDL | EBURG FL 32068 | |
| 3. The mailing a | address (if different): | | |
| 4. Date of incorporation/qualification: 03/02/2010 Do | | Document number: F10000 | 0001031 |
| 5. The name and | d street address of the current registered a rtment of State: | | |
| | ANTHONY LEONARD | | |
| | 5540 BUZZIE LN | - | TILE TILE |
| | MIDDLEBURG FL 32068 | | 題多一 |
| 6. The name and (if changed): | d street address of the new registered ager | nt (if changed) and /or registered offi | ice ma |
| | NRAI Services, Inc. | | STATE FLORITE |
| | 2731 Executive Park Drive, | <u> </u> | 2 |
| | Weston, FL 33331 | | _ |
| The street addre | ess of its registered office and the street l be identical. | address of the business office of its | s registered agent, |
| Such change was authorized by the | as authorized by resolution duly adopted he board, or the corporation has been no | d by its board of directors or by an otified in writing of the change. | officer so |
| Ulsignati | ure of the officer of director) | Wendy Ward Sec | retary |
| I hereby accept I further agree t of my duties, an document is bei corporation has LA SUV(U | the appointment as registered agent an to comply with the provisions of all stat ad I am familiar with and accept the obl ing filed merely to reflect a change in th s been notified in writing of this change. | nd agree to act in this capacity. utes relative to the proper and com igation of my position as registered te registered office address, I hereb | aplete performance I agent. Or, if this by confirm that the |
| by: Wendi | M. Cook gnature of Registered Agent) | 04/12/10 | |
| venai m. C | balf of an entity: | (Date) | |
| | ook, Assistant Secretary | | |
| (1 | Typed or Printed Name) | | |

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