

(Reque	stor's Name	
(Addres	ss)	
(Addres	ss)	
(City/St	ate/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Na	me)
(Docum	nent Number	)
Certified Copies	Certificate	s of Status
Special Instructions to Filin	g Officer:	
		;

Office Use Only



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Ra Change



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

CI

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: November 13, 2014

Order#: 366059-006

Re: WEST ROOFING SYSTEMS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.0 ange is submitted for a corpo er to change its registered of	oration organized under	the la	ws of the State o	<u>f</u> ОН	is	
	the corporation: WEST ROC						
2. The principal	office address: ERCE DR., LAGRANGE OF						
3. The mailing a	address (if different): PO Bo	ox 505, LaGrange, OH	44050				
4. Date of incorp	poration/qualification: 12/0	1/2010 Docu	ument	number: F10000	0005242		
	d street address of the current rtment of State: (If resigned,		egistere	ed office on file	with the		
•	C T CORPORATION SYS	TEM					
	1200 SOUTH PINE ISLAN	ID ROAD			_		
	PLANTATION		FL	33324	_		
6. The name and (if changed):	d street address of the new re		ged) and	d /or registered o	SECKE!	ACN 71	· - 1 }
	Corporation Service Comp	pany		· · · · · · · · · · · · · · · · · · ·	- 52 - 성급		7-1-1
	1201 Hays Street						,
	Tallahassee	P.O. Box NOT acceptable	FL	32301	<u>ာ</u> န် -	S: 53	<del>-</del>
The street addre	ess of its registered office ar be identical.	nd the street address of	the bu	siness office of	its registered	_	t,
Such change wa authorized by th	as authorized by resolution of the board, or the corporation	duly adopted by its boar has been notified in wr	rd of d iting o	irectors or by an of the change.	officer so		
		Dona Prie		ice President			
I herely accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as register to comply with the provision my duties, and I am familia is document is being filed muthat the corporation has been Service Company	r with and accept the o serely to reflect a chang	act in t e to the bligati te in th	ion of my positio se registered offi	mplete on as registe	red I	
By: Arian	nature of Registered Agent	11/10/20	)14	Date			
U	half of an entity:			Date			
Sylvia Queppet	, Assistant Vice President						
Ty	ped or Printed Name						

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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