## F 5 3664 FORD & LOVELACE, P.A.

EDWIN I. FORD
WILLIAM K. LOVELACE\*

---\*LLM. IN TAXATION

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ESTATE PLANNING & ADMINISTRATION TAX, CORPORATION & BUSINESS LAW REAL PROPERTY LAW

\*\*\*\*\*35.00 \*\*\*\*\*35.00

October 9, 1998

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

RE: CMK TRIM PRODUCTS OF FLORIDA, INC.

Dear Sir or Madam:

Enclosed is an original and one (1) copy of the Statement of Change of Registered Agent for the above referenced corporation, along with a check in the amount of \$35.00 for the filing fee.

Please return to this office, the original recorded Statement of Change of Registered Agent for the corporate record book.

Thank you for your prompt assistance in this matter.

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Yours very truly, William K. Lovelan

William K. Lovelace

WKL/wbs Enclosures 98 OCT 13 AM II: 58

## FLORIDA DEPT. OF STATE, SANDRA MORTHAM, SECRETARY OF STATE

## 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, the undersigned Corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or Registered Agent, or both, in the State of Florida.

- The name of the Corporation is CMK TRIM PRODUCTS OF FLORIDA, INC.
- Date of incorporation is 11/01/81. Document Number is F53664.
- The name and address of the current Registered Agent and office: Wilfred P. McGlone 10850 47th St. North Clearwater, Florida 34622
- The name and address of the new Registered Agent and office: William K. Lovelace
   2310 West Bay Drive Largo, Florida 33770

98 OCT 13 AMII:58 SECRETARY OF STATE

The street address of its Registered Agent 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

Myssey /Wslave

Wilfred P. McGlone

President

9/7/

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

Signature

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Registered Agent

Date

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILING FEE: \$35.00

CR2E045 (7-91)