Document Number, Only-0006302 C T CORPORATION SYSTEM 660 East Jefferson Street Requestor's Name Tallahassee, Florida 32301 Address (850) 222-1092 **35.00 Phone Zip State City **CORPORATION(S) NAME** () Profit () Merger () Amendment () NonProfit) Limited Liability Company () Dissolution/Withdrawal () Mark () Foreign () Other () Annual Report () Limited Partnership ()/Ohange of R.A. () Fict. Filing () Reinstatement) UCC-1 UCC-3 () Limited Liability Partnership () CUS () Photo Copies () Certified Copy () After 4:30 () Call if Problem () Call When Ready Pick Up () Will Wait Walk In () Mail Out Please Return Extra Copy(s) Name Filed Stamp Availability Document 4,6,98 Thanks, Melani Examiner Updater Verifier Acknowledgment W.P. Verifier CR2E031 (1-89)

Florida Department of State, Jim Smith, 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 Tennessee submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is: Custom Air Conditioning, Inc. Document number F96000006302 1b. Date of incorporation 12/4/96 2. The name and address of the current registered agent and office: Corporation Service Company 1201 Hays Street; Tallahassee, FL 32301-2525 The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida 33324 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 authorized by the board Anthony M. Schofield, Secretary SIGNATURE Typed or printed name and title DATE 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 COM-PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

	C T CORPORATION SYSTEM
SIGNAT	URE BY: Mary R. adams
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Registered Agent)
DATE	4198
	MAM R. Adams, Asst. Secy

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

CR2E045 (7-91) (FLA. - 2194 - 3/4/92) FILING FEE: \$35.00