F9700002490

- Atlanta, G 3200 cobb	O Galleria Phuyta A 30339-5921	30
(Ac	ddress)	_
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	_
(Do	ocument Number)	
Certified Copies	Certificates of Status	_
Special Instructions to	Filing Officer:	1
		ŀ
		1

Office Use Only

Redesignating CT



700014079267

03/18/03--01033--004 **35.00

O3 MAR 18 PH 12: 07
SECRETARY OF STATE
ALLAHASSEE, FLORID

SP 3/26/03

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

Pursuant to the pr	ovisions of sections 607.0502	?, 617.0502, 607.1508, o	r 617.1508, Florida Statutes,	
the undersigned co	rporation organized under the	laws of the State of $_$	relaware	
submits the followi	ng statement in order to chan	ge its registered office o	r registered agent, or both, in	
the State of Florida				
1. The name of the	corporation: RMA	Home Seus	as Ill.	
_16/a	The Home Sepot	Installed Sal	es '	
2. The mailing add	ress of the corporation:	200 Cobb 6	allewa Pkuy	
Seute	200 Affanta	ga 303.	39	
3. Date of incorpor	ration/qualification: 3/27	197 Document	t number:	
4. The name and ad	ldress of the current registered	agent and registered offi	ce:	
	CT Import	in Suctour	registered office (if change of the	
	1210 South line	a Taland RA	7	-
	Mantation F	L 33324	P	•
5 The name and a	Idress of the new registered ag		registered office (if changed)	
5. The name and ac		NOT Acceptable)	egistered office (if changed)	Ĺ
	Same	* /	DE DE	
	Juli C			
agent, as changed,	of its registered office and the will be identical.			
Such change was a	authorized by resolution duly board.	adopted by its board of o	directors or by an officer so	
authorized of the t	Jouru.		3/20/08	
(Signature of a	officer, chairman or vice chairman of	the board)	Date	
	1 C()	r sand , xx		
``	(Printed or typed name and title)	01.07 23 3	* · ·	
corporation, I here I further agree to a	d as registered agent and to o eby accept the appointment as comply with the provisions of duties, and I am familiar wit	registered agent and ag all statutes relative to th	gree to act in this capacity. he proper and complete	
registered agent	dunes, and I am juminar wa	n and accept the confu	,/ /	
(Me	llen Sallas		11/03	
Signi	Vice Pr	Savage (L esident	Date) /	
If signing on behalf of	an entity:			
——————————————————————————————————————	ed or Printed Name)		(Capacity)	

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