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Lun Grynes or SEELEY & KARATINOS, P.A. Soe First Avenue North St. Petersburg, Florida 33701 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) 2. (Corporation Name) (Document #) 3. (Corporation Name) (Document #) 4. (Corporation Name) (Document #) Walk in Pick up time Corporation Name) (Corporation Name) (п			
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Examiner's Initials

CR2E031(1/95)

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.
1. The name of the corporation is: Perma-Guard Industries, Inc.
2. The mailing address of the corporation is: 6790-118th Avenue North, Largo, FL 33773
3. Date of incorporation/qualification: 311683 Document number: 628153
4. The name and address of the current registered agent and office:
Roxann D. Seeley, Simons & Seeley, P. A. 4300 Duhme Rd., Suite 303 Madeira Beach, FL 33708 S. The name and address of the new registered agent and office: (P. O. Box Not Acceptable) S. To St. Petersburg, FL 33701 The street address of its registered office and the street address of the business office of its registered. Such change was authorized by conditional of the street address of the business office of its registered.
authorized by the board. Signature of an officer, chairman or vice chairman of the board) (Date)
Mark Delaguil, Vice President (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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. Solution Sol
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(7/97)