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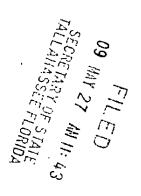
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LAW OFFICES

#### NEILL, GRIFFIN, TIERNEY, NEILL & MARQUIS

CHARTERED

311 SOUTH SECOND STREET

SUITE 200

FORT PIERCE, FLORIDA 34950

MAILING ADDRESS:
POST OFFICE BOX 1270
FORT PIERCE, FL 34954
TELEPHONE (772) 464-8200
FAX (772) 464-2566

RICHARD V. NEILL+D 'CHESTER B. GRIFFIN\*O

J. STEPHEN TIERNEY, III
RICHARD V. NEILL, JR.+
RENÉE MARQUIS-ABRAMS\*

\*BOARD CERTIFIED WILLS, TRUSTS & ESTATES LAWYER \*BOARD CERTIFIED TAXATION LAWYER \*BOARD CERTIFIED CIVIL TRIAL LAWYER DOF COUNSEL

May 22, 2009

Florida Dept. of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Jim Wilson Plumbing, Inc.

Dear Sir/Madam:

Enclosed herewith are the following:

- 1. Cover letter, and Statement of Change of Registered Office or Registered Agent or Both for Corporation,
- 2. Cover letter, and Officer/Director Resignation for a Corporation, together with an Action appointing Karen F. Wilson as President, Vice President, Treasurer, and Secretary, and
- 3. check in the amount of \$70.00 for both filings.

Please change the registered agent and officers in accordance with the enclosed documents.

Thank you for your assistance in this matter. If you have any questions, please do not hesitate to contact me.

Very truly yours,

Renée Marquis-Abrants

RMA:rf Enclosures

cc: Karen F. Wilson

#### **COVER LETTER**

Divisio	on of Corporations	
OUB IECT.	Jim Wilson Plumbing, Inc.	
SUBJECT:	Name of Corp	poration
DOCUMENT	NUMBER:H81096	
The enclosed S	tatement of Change of Registered Office/A	agent and fee are submitted for filing.
Please return al	Il correspondence concerning this matter to	the following:
	Renee Marquis-Abrams	
	Name of Conta	ct Person
	Neill, Griffin, Tierney	, Neill & Marquis
	Firm/Comp	pany
	P.O. Box 1270	
	Addres	s
	Fort Pierce, FL 34954	
	City/State and I	Zip Code
	E-mail address: (to be used for futu	re annual report notification)
For further info	ormation concerning this matter, please call	:
Renee Mar	quis-Abrams	at ( 772 ) 464-8200 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$	35.00 check made payable to the Departme	ent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle
		Tallahassee, FL 32301

TO:

Amendment Section

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

statement of change	e is submitted for a	607.0502, 617.0502, 607. corporation organized ur red office or registered ag	nder the laws of the St	tate of <b>Florida</b>	
		Jim Wilson Plumb		ate of Mortia.	
The name of the corporation:     The principal office address:		395 E. Midway Ro			
		Fort Pierce, FL 34982			
3. The mailing addr	ess (if different):	364 Traub Road			
<del></del>		Fort Pierce, FL	34982		
4. Date of incorpora	ntion/qualification:	10/14/85 <sub>I</sub>	Document number:l	н81096	
		eurrent registered agent ar gned, enter resigned)	d registered office on	n file with the	
_ F	Renee Marquis	-Abrams			
311 S. 2nd Str Fort Pierce, I		reet			
		FL 34950		09 SEI FALL	
(if changed):	eet address of the r	new registered agent (if ch	nanged) and /or registe	. ≥8 <u>~</u>	
<u></u>	364 Traub Roa				
	704 IIAUD IQU	P.O. Box NOT accepta	ble	H: 43 STALE ORIDA	
_ <u>F</u>	ort Pierce,	FL 34982		<i></i> ω	
The street address as changed will be	of its registered of identical.	fice and the street addres	s of the business off	ice of its registered agent,	
Such change was a authorized by the b	uthorized by resol poara, or the corpo	ution duly adopted by its ration has been notified	board of directors o	or by an officer so nge.    / <sub>4</sub>	
Kary Signature of	an officer or director	<b>→</b> 4	AREN F.	ame and title	
I hereby accept the I further agree to c of my duties, and I document is being corporation has be	appointment as r omply with the pro am familiar with a filed merely to ref ed notified thewrit	egistered agent and agre ovisions of all statutes re and accept the obligation ect a change in the regis ing of this change.	e to act in this capac lative to the proper of a of my position as re tered office address,	city, and complete performance egistered agent. Or, if this , I hereby confirm that the	
West T. Signatur	re of Registered Agent	<u> </u>	5-20-	.09	
If signing on behal	f of an entity:	<u> </u>			

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

## ACTION IN WRITING BY THE SHAREHOLDER AND DIRECTOR OF JIM WILSON PLUMBING, INC.

The undersigned, being the sole shareholder and director of Jim Wilson Plumbing, Inc., a Florida corporation (the "Corporation"), does hereby waive all formal requirements to the notice and holding of a special meeting and, in accordance with Florida Statutes, consents in writing, in lieu of a Special Meeting, to the following:

RESOLVED, that the directors, who shall serve as the Board of Directors from and after this date, are hereby elected as follows:

Karen F. Wilson

RESOLVED, that the officers of the Corporation duly elected to serve from and after this date are as follows:

President:

Karen F. Wilson

Vice-President:

Karen F. Wilson

Secretary:

Karen F. Wilson

Treasurer:

Karen F. Wilson

Pursuant to the authority granted in Florida Statutes, this action is hereby executed by the undersigned, being the sole shareholder and director of the Corporation, this 2 v day of May, 2009.

Karen F. Wilson, Shareholder and Director