549029

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (lauress) | | | | |
| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| i . | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| (Sociality Hambor) | | | | |
| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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TRANSMITTAL LETTER

| TO: | Amendment Section Division of Corporations | |
|-----------------------|--|---|
| SUB. | JECT: Tipton Interiors Contracti | ing, Inc. |
| | | (Name of corporation) |
| DOC | CUMENT NUMBER: J49029 | |
| The e | enclosed Statement of Change o | f Registered Office/Agent and fee are submitted for filing. |
| Pleas | se return all correspondence con | cerning this matter to the following: |
| Jem | y Wayne Tipton | |
| | (Name of perso | n) |
| Tipto | on Interiors Contracting, Inc. | |
| | (Name of firm/com | pany) |
| P.O. | Box 2614 | |
| | (Address) | |
| Ocal | la, Florida 34478-2614 | |
| | (City/state and zip o | code) |
| For f | urther information concerning the | his matter, please call: |
| Jerry | / Wayne Tipton | at (352) 629-3300 (Area code & daytime telephone number) |
| | (Name of person) | (Area code & daytime telephone number) |
| Enclo | osed is a \$35.00 check made pay | yable to the Department of State. |
| Amer Divis P.O. | ing Address: ndment Section sion of Corporations Box 6327 hassee, FL 32314 | Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 |

FILED

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

| Pursuant to th | e provisions of sections 607.05 | 702, 617.0502, 607.1508, or 617.1508, Florida | ı Statutes, |
|---|--|--|--|
| ł . | of change is submitted for a corp | poration organized under the laws of the State o | of. |
| Florida | in order to change its re | egistered office or registered agent, or both, in | the State |
| of Florida. | | | |
| 1. The name of | f the corporation: Tipton Interiors | s Contracting, Inc. | |
| 2. The principa | al office address: 3940 Southeas | st 45th Court - Ocala, Florida 34480 | |
| 3. The mailing | address (if different): P.O. Box | 2614 - Ocala, Florida 34478-2614 | |
| 4. Date of inco | rporation/qualification: Febru | ary 13, 1987 Document number: J49029 | |
| 4 | artment of State: | egistered agent and registered office on file with | the |
| | Jerry Wayne Tipton | | Total C |
| | 20651 Northeast Highway 27 | | 33 S |
| , | Williston, Florida 32696 | | SEP 2 |
| 6. The name a changed): | and street address of the new re | egistered agent (if changed) and /or registered | 26 AM ID: 23 ARYSOF STATE ASSES, FLORIDA |
| changeay. | Jerry Wayne Tipton | | FLO |
| t 1 | 3940 Southeast 45th Court | | RISE RISE |
| 1 | | onal mailbox NOT acceptable) | |
| į | Ocala, Florida 34480 | | |
| The street add agent, as change | ress of its registered office and t ged will be identical. | the street address of the business office of its re | egistered |
| Such change wanthorized by | vas authorized by resolution dul the board, or the corporation has | y adopted by its board of directors or by an off s been notified in writing of the change. | icer so |
| Juza. | er, chairman or vice chairman of the board) | Jerry Wayne Tipton | |
| I hereby accep Ifurther agree performance o registered age | ot the appointment as registered to comply with the provisions of the first of the start of the start of my duties, and I am familiar v of the start of the start | (Printed or typed name and title) agent and agree to act in this capacity. of all statutes relative to the proper and compl vith and accept the obligation of my position a g filed merely to reflect a change in the registe pration has been notified in writing of this cha | s ered |
| Sance | | September 17, 2003 | |
| 10 | Signature of Registered Agent) | (Date) | |
| If signing on beha | | Droeidant | |
| Jerry Wayne T | (Typed or Printed Name) | President (Canacity) | |

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