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567920

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:
Division of Corporations
Fax Number : (850) 205-0380

From:
Account Name : ROETZEL & ANDRESS
Account Number : I20000000121
Phone : (941) 649-6200
Fax Number : (941) 261-3659

REGISTERED AGENT CHANGE
PAX QUALITY CONSTRUCTION, INC.

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$96.25

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Corporate Filing

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Date: 11/NOV 09 10:17 AM To: @ 2813659
ort Myers Fax Page: 002-002

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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: PAX QUALITY CONSTRUCTION, INC.
2. The mailing address of the corporation is: 5835 SUNNYSIDE LANE
FORT MYERS, FL 33919
3. Date of incorporation/qualification: April 13, 1987 Document number: J67920
4. The name and address of the current registered agent and office:
VAL DIVALENTIN
5835 SUNNYSIDE LANE
FORT MYERS FL 33919
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
STEVEN I. WINER c/o ROETZEL & ANDRESS
2320 FIRST STREET, SUITE 1000
FORT MYERS, FL 33901

The street address of its registered office 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.

(Signature of an officer, chairman or vice chairman of the board)

11/7/01
(Date)

Val diValentin, 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.

(Signature of Registered Agent)

11/5/01
(Date)

If signing on behalf of an entity:

Steven I. Winer

(Typed or Printed Name)

(Capacity)

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

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

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