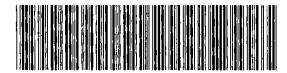
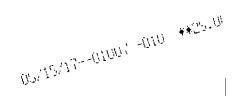
J73611

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Joe Hillman Plumbers, Inc. Name of Corporation
DOCUMENT NUMBER: J73611
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Roxanne Cester Name of Contact Person
Jee Hillman Plumbers, Inc.
2280 SIN 70th Ave St. 1-2
Davie, FL 33317 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Description
Enclosed is a \$35.00 check made payable to the Department 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 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building Tallahassee, FL 32314

CR2E045 (03/12)

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, this statement of change is submitted for a corporation organized under the laws of the State of Florida.
1. The name of the corporation: Joe Hillman Plumbers, Inc.
2. The principal office address: 3380 SW 7011 Ave St. 1-3 DAVIC, FL 33317
3. The mailing address (if different): SAMO.
4. Date of incorporation/qualification:
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
110 E Broward plvd 1580
Ft lawderdale, FL 35301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Lella M. Lug D ABSD SW ACHN AUC Stell-2 Mult FL 33317 PO Box NOT acceptable
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, or the corporation has been notified in writing of the change. ALL MACIALIFICATION Printed or typed name and little
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Skille Lead 10 17 Date Date
If signing on behalf of an entity:
Typed or Printed Name

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