L0300003382

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	#)		
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: June 27, 2014

Order#: 184437/006

Re: ROOF USA (FL) LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 $\frac{1}{X}$ Check in the amount of \$25.

Please take the following action:

<u>XX</u> File in your office on a routine basis.

XX___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: ROOF USA (FL)	LLC				
2.	(a)	17300 Nicasio Jay Avenue Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Brooksville, FL 34614	_ (b)	17300 Nicasio Jay Avenue Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Brooksville, FL 34614			
		DIOUNSVIIIE, I L 34014		BIOOKSVIIIC, I L 04014			
		01/28/2003		L03000003382			
3.		Date of filing/registration in Florida	4.	Document number			
5.	(a)	C T Corporation System					
	()	Registered Agent and Registered Office shown on the records of the	e Florida l	Dept. of State:			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		∓ 33					
1200 South Pine Island Road							
		Plantation	22224				
		riantation ,FL_	33324				
	(b)	Corporation Service Company					
	(0)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	ress:			
				٠.			
		1201 Hays Street					
		NEW Registered Office Address:					
							
		Tallahassee , FL	32301				
the ag	e cha ent v as/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist oility cor the limi	ered office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in			
_	C:	ure of a member or authorized representative of a member	Dona	Priebe, Authorized Person Printed or typed name of signee			
I pr th to no	herel ovisi e obl mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.		in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been			
31	Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Asst. VP						

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00