2007 LIMITED LIABILITY COMPANY

May 07, 2007 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # L03000050220 05-07-2007 90373 045 ****50.00 1. Entity Name **RORY YORK DRYWALL LLC** Principal Place of Business Mailing Address 3920 ALAFLORA ROAD **60042100** 3920 ALAFLORA ROAD WING, AL 36483 WING, AL 36483 03232007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 20-0417713 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YORK, RORY DO NOT WRITE 692 E. WILLIAMS AVE #B CRESTVIEW, FL 32539 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) agent and title if applicable Filing Fee is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS MGR YORK, RORY NAME 3920 ALAFLORA ROAD STREET ADDRESS CITY-ST-ZIP WING, AL 36483 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PROVED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED