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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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3. BRYAN APR 2 0 2006

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limite | d liability company is: _ | Royal Crown Roofing, | LLC | |
|--|--|--|---|--|
| 2. The mailing address of | f the limited liability com | npany is: <u>52 Prince Mic</u> | hael Lane, | · |
| | | Palm Coast, F | L_32164 | |
| March 29, 2005 L0500003105 | | | 58 | · |
| 3. Date of filing/registration in Florida 4. Doc | | | mber | |
| 5. The name of the register Florida Department of | | ered office address as shown | on the record | s of the |
| | Schaffer. Danie | | <u>.</u> • " | - 1 |
| | ll Roxboro Driv | Name ze | | |
| | | ddress | <u></u> ₹* - | |
| | Palm Coast, FL | | <u> </u> | ₩. |
| | City, S | tate and Zip | | 8 |
| 6. The name and address of | of the new registered age | ent and/or office: | ÷ . | PR SER |
| | David A. Waddel | 11 | | FILED STAINED OF STAINED OF CORPORATE APR 17 PM 2: |
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| | 52 Prince Micha | | 2 52 | 987 987 |
| | Florida street address (| (P.O. Box NOT acceptable) | | |
| | Palm Coast | FL 32164 | | Tions 27 |
| | City, Sta | ate and Zip | | |
| confirmed that after the cl and the business office of liability company, it is her | nange or changes are mad the registered agent will reby confirmed that the conited liability company of the limited liability of | | of the registe of a Florida l ed by an affirr | ered office limited mative vote |
| David A. Waddel | .1 | | =- | |
| (Printed or typed name of signee) | | - | | |
| I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, it hereby confirms (Signature of Registered Agent) | intment as registered age is of all statutes relative if d accept the obligations his document is being fil that the limited liability | ent and agree to act in this co to the proper and complete p of my position as registered ed to merely reflect a chang company has been notified i | apacity. I furi verformance of agent as provi e in the regist n writing of th | ther agree to f my duties, ided for in ered office uis change. |

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