

#L05000063786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

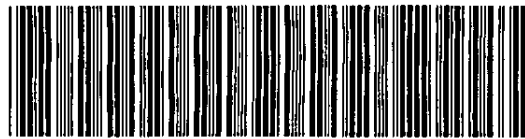
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
AUG 21 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Advanced Roofing of Central Florida LLC (DBA Name)
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tomara Martin

Name of Person

Advanced Roofing, Inc.

Firm/Company

1950 NW 22nd Street

Address

Fort Lauderdale, FL 33311

City/State and Zip Code

tomaram@advancedroofing.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tomara Martin

Name of Person

at (954) 522-6868 x1069

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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.

- 06/28/2005

L05000063786

- Michael J. Cohen

2100 NW 21st Avenue

Fort Lauderdale, FL 33311

- 200 Northstar Court

Sanford, FL 32771

,FL

Signature of a member or authorized representative of a member

Michael Kornahrens

Printed or typed name of signee

Signature of Registered Agent

FILING FEE: \$25.00