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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Floors, LLC (Name of I	Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Robert Spurlock	
(Name of Person)	
Floors, LLC (Firm/Company)	FILED 2006 JAN 27 PM 2: 10 2007 ALLAHASSEE, FLORIDA
(Timb Company)	FILE LAHASSE
4771 Bayou Blvd., Suite 332	7 P
(Address)	THE 2
Pensacola, FL 32503-2607	PRIDA ORIDA
(City/State and Zip Code)	
For further information concerning this matt	ter, please call:
Robert Spurlock	at (850) 494-9440
(Name of Person)	(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	ng amount:
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

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 limit	ed liability company	is: Floor	s, LLC		
2. The mailing address of	of the limited liability	compan	_{y is} ; 4771 Bayou B	Slvd., Suite 332	
Pensacola, FL 32503-260					
August 15, 2005			L050000804		_
3. Date of filing/registra	tion in Florida		4. Docume	nt number	_
5. The name of the regist Florida Department of	ered agent and the re	gistered	office address as sh	hown on the records of the	
1	Business Filings	Incorpo	rated		
		Nam			
	1203 GOVERNOR	RS SQUA	RE BLVD., SUITE	206 JAN 27	
		Addre		- 5 5	
TALLAHASSEE, FL 32301-2960		E 2 =			
		ty, State			٦.
6. The name and address	of the new registered	d agent a	nd/or office:	SSEE, FL	י ל
	Robert Spurlock			FLORID	
		Name			
	4771 Bayou Blvd.,		2		
	Florida street addr	ress (P.O.	Box NOT accepta	able)	
	PENSACOLA,	FL	32053-2607		
City, State and Zip					

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Robert Spurlock

(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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