

DOCUMENT# L06000033918

Entity Name: TOM'S FLOOR COVERING SERVICE, LLC

New Principal Place of Business:**New Mailing Address:**

Certificate of Status Desired (X)

Name and Address of New Registered Agent:

BRANNON, THOMAS H
867 SW HIDDEN RIVER AVE
PALM CITY, FL 34990 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BRANNON, THOMAS H
Address: 867 SW HIDDEN RIVER AVE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: THOMAS H BRANNON

RA

04/17/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date