LO L000079434

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S. HAWKES
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EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Triple Diamond Flass Products, LLC (Name of Corporation)
DOCUMENT NUMBER: <u>L06000079434</u>
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
(Name of Confact Person)
Triple Diamond Glass Products, LLC (Firm/Company)
105 Triple Diamond RLVD Svite 101 (Address)
Worth Marice, FL 34275 (City/State and Zip Code)
For further information concerning this matter, please call: 941-484-7750
Paul Hastetter at (941) 410-1569 (Name of Contact Person) at (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Companyians Street Address: Amendment Section
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
Tallahassee, FL 32314 Chilon Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Triple Diamond Glass Products, LLC
2. The principal office address: 105 Triple Diamond BLUD Svite 101
North Venice, FL 34275
3. The mailing address (if different): PO Box 1967
Nokomis, FL 34274
4. Date of incorporation/qualification: 8-11-06 Document number: LOG 000079434
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Wagner, E. John
200 S. Change Ave
Sarasota, FL 34236
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Paul Hostetler
105 Triple Diamond BLUB suite 101 (P.O. Box NOT acceptable)
North Venice, FL 34275
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signalule of an officer or director) PAULE, Hostetley MM (Printed or typed name and little)
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent) (Signature of Registered Agent)
If signing on behalf of an entity:
CAULE, Hostetlev (Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *