L09000061268

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emily Harrie)
(Document Number)
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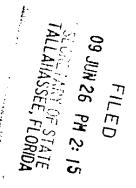


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B. KOHR
JUN 2 6 2009

EXAMINER





N SERVICE COMPANY		
ACCOUNT NO. : I2000000195		
DEFENDING 040200 4201500		
AUTHORIZATION COST LIMIT : \$25.00		
AUTHORIZATION SAULUE MAIN TO THE TOTAL TO TH		
COST LIMIT : 4\$ \$25.00		
ORDER DATE : June 26, 2009		
ORDER TIME: 9:30 AM		
ORDER NO. : 049300-010		
CUSTOMER NO: 4321592		
CHANGE OF AGENT		
NAME: CONTINENTAL STUCCO PRODUCTS OF FLORIDA, LLC		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
XX PLAIN STAMPED COPY		
CONTACT PERSON: Troy Todd EXT# 2940		
EXAMINER:		

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. Name of the limited liability company:Continen	tal Stucco Products of Florida, LLC	
2. (a) Principal office address of limited liability compan	y: 4301-C Pleasantdale Road	
(Note: MUST BE STREET ADDRESS) Doravilla, GA 30340		
(b) Mailing address of limited liability company:	4301-C Pleasantdale Road	
(Note: MAY BE POST OFFICE BOX)	Doraville, GA 30340	
Juпе 24, 2009 3. Date of filing/registration in Florida	L09000061268 4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	Michael D. Hawks	
Registered Office Address:	3001 Old Winter Garden Road Orlando, FL 32805	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	Michael D. Hawks	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2911 Old Winter Garden Road	
	Orlando, FL ,FL 32805	
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		
Alsha Oliver-Staley Printed or typed name of signor	-	
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 olds Ir.S. Or, if this document is being filed to merely reflect a change in the registered office address. Hereby confirm that the smiled liability company has been notified in writing of this change.		
Signistin of Rogisteres Agent	LAH	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 SSE FILING FEE: \$25.00		
DNFIS18 (05/08)	PH 2: 15 OF STATE E, FLORID	