

M 98000000318



Home Depot Installed Products  
Corporate Office  
207-G Kelsey Lane  
Tampa, FL 33619

900003043239--8  
-11/12/99-01110-013  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- |                                    |   |  |
|------------------------------------|---|--|
| <input type="checkbox"/> Walk in   | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out  | <input type="checkbox"/> Will wait          | <input type="checkbox"/> Certificate of Status |
| <input type="checkbox"/> Photocopy |   |  |

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
99 NOV 29 PM 1:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten:* 2000-11-29-99  
286 M98000000318

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

November 18, 1999

HOME DEPOT INSTALLED PRODUCTS  
207-G KELSEY LANE  
TAMPA, FL 33619

SUBJECT: INSTALLED PRODUCTS USA, LLC  
Ref. Number: M98000000318

We have received your document for INSTALLED PRODUCTS USA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Carol Mustain  
Corporate Specialist

Letter Number: 099A00055483

RECEIVED  
99 NOV 29 AM 10:29  
DIVISION OF CORPORATIONS

Florida Department of State, Sandra B. Mortham, Secretary of State  
**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 organized under the laws of the State of Delaware, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the limited liability company is: Installed Products USA, LLC

1b. The mailing address of the limited liability company is: 207-G Kelsey Lane  
Tampa, FL 33619

1c. Date of filing/registration in Florida: 4/3/98 Document number: M98000000318

2. The name and address of the current registered agent and office:

CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

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99 NOV 29 PM 1:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3. The name and address of the new registered agent and office: (P.O. BOX NOT ACCEPTABLE)

Blake A Lipham  
207-G Kelsey Lane  
Tampa, FL 33619

After the change or changes are made, the street address of the registered office and the business office of the registered agent will be identical.

Such change was authorized by affirmative vote of a majority of the members of the limited liability company or as provided in the articles of organization or the regulations of the limited liability company.

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

11-22-99  
(Date)

Blake A. Lipham, VP CFO  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated limited liability company, 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.

[Signature]  
(Signature of Registered Agent)

11-22-99  
(Date)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314