P000000 28655

| (Re | equestor's Name) | |
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| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | MAIT | MAIL |
| (Bu | isiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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DA Change

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COVER LETTER

| Division of Corporations | |
|--|--------|
| SUBJECT: Felix Fera Prumbing inc. (Name of Corporation) | |
| DOCUMENT NUMBER: P000000 28655 | |
| 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: | |
| Authory J. CATAPANO (Name of Contact Person) | |
| (Name of Contact Person) | |
| Felix Fera Plumbing Inc, (Firm/Company) | |
| 215 No. STATE Rd 7 (Address) | |
| (Address) | |
| Hollywood FLorida 3302/ | |
| For further information concerning this matter, please call: | |
| AnTHONY (OR) JUNIE at (954) 929-7473 (Name of Contact Person) (Area Code & Daytime Telephone No. | umber) |
| Enclosed is a \$35.00 check made payable to the Department of State. | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Mailing Address: Amendment Section Division of Corporations Clifton 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 Free da |
|---|
| in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: Felix Ferr Prumbing inc. |
| 2. The principal office address: 215 No. STATE Rd 7 |
| Hollywood, FL 33021 |
| 3. The mailing address (if different): SAME as ABove |
| 4. Date of incorporation/qualification: 3 21/2000 Document number: P000 000 78655 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Anthony J. CATAPANO (CATAPANO J. CATAPANO |
| Anthony J. CATAPANO (CATAPANO J. CATAPANO 1885-A Nontheast 149 street |
| North Mismi, FL 33181 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Anthony J. CATAPANO |
| 215 No. STATE Rd 7 (P.O. Box NOT acceptable) Holly Wood, Floridg 33021 |
| (P.O. Box NOT acceptable) |
| Itollywood, Florida 3302/ |
| 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. |
| Pres. AntHONY J. CATAPANO Pres. |
| (Signature of an officer or director) (Printegor typed name and title) |
| 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. |
| 04/25/08 |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| · |
| (Typed or Printed Name) |

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