

ATTORNEY AT LAW

KATHLEEN REYNOLDS

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September 26, 2001

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

100004618001--3
-10/01/01--01054--006
*****35.00 *****35.00

RE: Statement of Change of Registered Agent -
The Masters Plumbing Company Of Destin, Inc.

Dear Sir/Madam:

Enclosed please find the original Statement of Change of Registered Agent for the above-referenced corporation. Also, enclosed is a check in the amount of \$35.00 representing the filing fee.

Thank you for your assistance in this regard. Should you have any questions or need additional information, please do not hesitate to contact me.

Sincerely,



KATHLEEN REYNOLDS

FILED
01 OCT - 1 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KR/mjp

Enclosures: a/s

cc: Wayne Knight, President
The Masters Plumbing Company Of Destin, Inc.

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STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH

To the Secretary of State of the State of Florida.

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

FIRST: The name of the corporation is
THE MASTERS PLUMBING COMPANY OF DESTIN, INC.

SECOND: The address of its present registered agent is
305 Main Street, Destin, Florida 32541

THIRD: The address to which its registered agent is to be changed is
455 GULF SHORE DR. #5 DESTIN, FL. 32541

FOURTH: The name of its present registered agent is
Kathleen Reynolds

FIFTH: The name of its successor registered agent is
GARY WAYNE KNIGHT

SIXTH: The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

SEVENTH: Such change was authorized by resolution duly adopted by its board of directors.

Dated SEPTEMBER 26TH, 2001.

THE MASTERS PLUMBING COMPANY OF DESTIN, INC.

(exact corporate name)

SIGNATURE: Gary W. Knight PRES.
(President or Vice President)

DATE: 9/26/01

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

FILING FEE: \$35.00

SIGNATURE: Gary W. Knight

DATE: 9/26/01

DIVISION OF CORPORATIONS - PO BOX 6327 - TALLAHASSEE, FL 32314

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OCT - 1 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA