P00000114305

(Requestor's Name)	
(Address)	
(
(Address)	
(0) (0) (7)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	1

Office Use Only



200245153872

03/01/13--01007--031 **35.00

12 M

◆ 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 Larida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: PReferred Aluminum of ZI., Inc
2. The principal office address: 1308 St. Johns Bluff Ad
3. The mailing address (if different): 50ME
4. Date of incorporation/qualification: 2 11 200 Document number: P000001/4305
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)
DAN ARMSTRONG LAW OSSICE
822 AIA N # 303
Ponte VedRA Bch, 71.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Tony Blanco 1308 St Johns Bluff Rd P.O. Box NOT acceptable DAY, 21. 32225
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. Printed or 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.
Agnature of Registered Agent 2 /2 // 13 Date
If signing on behalf of an entity:
Typed or Printed Name * * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)