B100008789

(Re	equestor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
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10/27/10--01008--025 **35.00



COVER LETTER

TO:	Amendment S Division of C	Section forporations					
SUBJ	ECT:	Domestic Designation	ns Roofing, Inc. f Corporation				
DOC	UMENT NUM	BER: PC	1000008789				
The e	nclosed Stateme	ent of Change of Registered Of	fice/Agent and fee are submitted	for filing.			
Please	return all corre	spondence concerning this ma	tter to the following:				
		Cvnth	ia A. Crow				
	_	Name of 0	ia A. Crow Contact Person				
		Danie die Des	dana Danfan I.a.				
	-		signs Roofing, Inc. /Company				
			company .				
	438 N. Fletcher Avenue						
	_	A	ddress				
	.						
		Fernandina Be	ach, Florida 32034				
	 -	City/State	and Zip Code				
		ccrow@b	ellsouth.net				
	ccrow@bellsouth.net E-mail address: (to be used for future annual report notification)						
For fu	orther information	on concerning this matter, pleas	se call:				
	C	Cynthia Crow	at (904)	753-1440			
	Name	of Contact Person	at (<u>904</u>) Area Code & Daytime T	Telephone Number			
Enclo	sed is a \$35.00 (check made payable to the Dep	partment of State.				
		Mailing Address: Amendment Section	Street Address: Amendment Section	ın.			
		Division of Corporations	Division of Corpo				
		P.O. Box 6327	Clifton Building				
		Tallahassee, FL 32314	2661 Executive Ce Tallahassee, FL 32				

$\stackrel{\cdot}{\smile}$ ' STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 60/. ange is submitted for a corp er to change its registered (poration organized	d under the laws of the Sta	te of Florida
	the corporation: Domes		_	
2. The principal	office address: 438 N. F	letcher Avenu	е	
Fernandin	na Beach, Florida 320	34		
3. The mailing a	address (if different): SAN	ΛE		
4. Date of incor	poration/qualification:	1/24/01	Document number:	P01000008789
	d street address of the current extraction of State: (If resigned		at and registered office on f	ile with the
	David H. McQuaig (Resigned)		
	4745 Sutton Park C	ourt, Suite 103	.	
	Jacksonville, Florida	a 32224		
6. The name and (if changed):	d street address of the new	registered agent (i	f changed) and /or register	ed office PLANT OCT 27
	Cynthia A. Crow			
	438 N. Fletcher Ave			ton .
		P.O. Box NOT ac	•	AH IO
	Fernandina Beach,			EG rm F
The street addr as changed wil	ess of its registered office I be identical.	and the street add	dress of the business offic	e of its registered agent,
Such change wauthorized by t	as authorized by resolution the board, or the corporation	on duly adopted by on has been notifi	y its board of directors or led in writing of the chang	by an officer so
Signatu	bond V. P are of an infect or director		Carlton C. Boyd,	Vice President
I hereby accept I further agree of my duties, an document is be corporation ha	t the appointment as regis to comply with the provis nd I am familiar with and ing filed merely to reflect is been notified in writing	tered agent and a ions of all statute accept the obliga a change in the r of this change.	gree to act in this capacii s relative to the proper an tion of my position as reg egistered office address, I	y. id complete performance istered agent. Or, if this hereby confirm that the
	46X)		10/25	/10
1	gnature of Registered Agent ehalf of an entity:		Date	
0 0				
	Cynthia A. Crow Typed or Printed Name			

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