

PO1000037319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900253969139

12/09/13--01036--010 \*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 DEC -9 PM 11:47

DEC 19 2013  
T. LEMMON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Roof Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P01000037319

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:

c/o D. Frank Wright, Esquire  
Name of Contact Person

Wright, Fulford, Moorhead & Brown, P.A.  
Firm/Company

505 Maitland Avenue, Suite 1000  
Address

Altamonte Springs, Florida 32701  
City/State and Zip Code

fwright@wfmblaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

D. Frank Wright, Esquire at (407) 425-0234  
Name of Contact Person Area Code & Daytime Telephone Number

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

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



WRIGHT, FULFORD, MOORHEAD & BROWN  
ATTORNEYS

WRIGHT, FULFORD, MOORHEAD & BROWN, P.A.  
505 MALLARD AVENUE / SUITE 1000 / ALFAMONTE SPRINGS, FL 32701  
407 425 0234 PHONE / 407 425 0260 FAX / [www.wfmblaw.com](http://www.wfmblaw.com)

December 5, 2013

**Via U.S. Mail**

Division of Corporations  
Attn: Registration Section  
Post Office Box 6327  
Tallahassee, Florida 32314

**Re: Roof Services, Inc.**  
**Our File Number: 2120-7**

To Whom It May Concern:

Enclosed please find the original Cover Letter and Statement of Change of Registered Office or Registered Agent or Both for Corporations of Roof Services, Inc. Also enclosed you will find my firm's check number 2018 in the amount of \$35.00 for the cost of your filing fee.

Thank you for your attention to this matter. Should you have any questions, please contact me at 800-327-0234.

Sincerely,

D. Frank Wright  
[fwright@wfmblaw.com](mailto:fwright@wfmblaw.com)

DFW/tnr  
Enclosures

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Roof Services, Inc.  
2. The principal office address: 1600 NE 12th Terrace  
Ft. Lauderdale, Florida 33305  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 04/09/2001 Document number: P01000037319

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)

Robert A. Crabill

Wright, Fulford, Moorhead & Brown, P.A.

505 Maitland Avenue, Suite 1000, Altamonte Springs, Florida 32701

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Wright, Fulford, Moorhead & Brown, P.A.

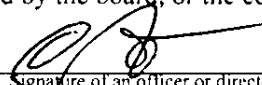
c/o D. Frank Wright, Esquire

P.O. Box NOT acceptable

505 Maitland Avenue, Suite 1000, Altamonte Springs, Florida 32701

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.

  
\_\_\_\_\_  
Signature of an officer or director

ATTORNEY-IN-FACT

\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Signature of Registered Agent

12/4/13

\_\_\_\_\_  
Date

If signing on behalf of an entity:

D. FRANK WRIGHT

\_\_\_\_\_  
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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 DEC -9 PM 11:47