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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Goldgrain Remodeling, Inc. (Name of corporation)
DOCUMENT NUMBER: POIOOO 107345
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:
Henry Kleiner (Name of person)
Goldgrain Remodeling, Inc. (Name of firm/company)
17100 NE 11ct. (Address)
North Hiami Beach, Fl, 33162 (City/state and zip code)
For further information concerning this matter, please call:
Name of person) at (786) 9240564 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

TO: Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the p	rovisions of sections 607.0502,	617.0502, 607.	.1508, or 617.1	508, Florida	Statutes,
	hange is submitted for a corpora	tion organized	under the laws	of the State o	f
Florida	in order to change its regist	tered office or	registered agen	t, or both, in	the State
of Florida.	e 11	•			_
1. The name of the	e corporation: <u>Goldgrain</u>	Komodelin	g. Inc.		$\frac{\omega}{\omega}$
2. The principal of	ffice address: 17100 NE	<u> 11 ct.</u>	ماند. حوري تامير <u>سي سن سي سن سي من سي سن</u>	SE	8
North 9	liami Reach, Fl, 331	67		+ S	6
3. The mailing add	dress (if different):		···	in the	7
·					5
4. Date of incorpo	ration/qualification: 11/07/	2001 Do	cument number	<u>- P01000 </u>	207345
5. The name and s Florida Departn	treet address of the current regist ment of State:	ered agent and	registered office	on file with	the
<u></u>	Mario C	era			
	19651 NW	57Hct.			
	Hialeah, Fl.	33015			
6. The name and changed):	street address of the new regist			-	office (if
	Henry K	leiner			,
<u></u>	P.O. Box or personal or	nailbox NOT acceptab	le)		
	North Miami Rea	uch, F1, 3	3162		
_	of its registered office and the s will be identical.	treet address o	f the business o		
7 1	authorized by resolution duly ad board, or the corporation has be				icer so
(Signature of an officer, ch	Minimum of the board)	- He	wn 7 KLI ted or typed name and	STNEL Gile)	
performance of my revistered avent.	e appointment as registered age comply with the provisions of all v duties, and I am familiar with to Or, if this document is being file ereby confirm that the corporati	and accept the ed merely to re	obligation of m lect a change ii	ly position as n the register	red
Jeigna di pigna	un Meiner	-	02/04/ (Date)	103	
If signing on behalf of	an entity:	#		٠	
	MY KLETNER			. <u> </u>	
(Type	d or Printed Name)		(Capacity)		

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