

P02000025570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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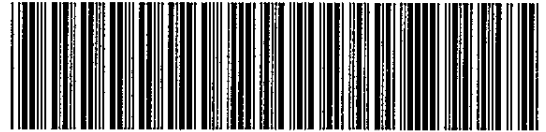
(Business Entity Name)

(Document Number)

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WRIGHT, FULFORD, MOORHEAD & BROWN, P.A.
ATTORNEYS

145 NORTH MAGNOLIA AVENUE
POST OFFICE BOX 2828
ORLANDO, FLORIDA 32802-2828
(407) 425-0234
(407) 425-0260 (FACSIMILE)
WWW.WFMBLAW.COM

D. Frank Wright, Esquire

fwright@wfmblaw.com

January 31, 2005

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

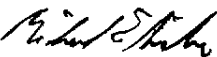
**Re: Statement of Change of Registered Agent for Universal Drywall Contractors,
Inc.
Our File Number: 1540-2**

To Whom It May Concern:

Enclosed please find an original and a copy of the Cover Letter and Statement of Change of Registered Agent regarding the above-referenced matter. Also, enclosed is my firm's check number 32045 in the amount of \$35.00 for cost of the filing fee. Please process this request at your earliest convenience and return a stamped copy of the Cover Letter and Statement of Change of Registered Agent to my office in the enclosed, self-addressed, stamped envelope.

If you have any questions, please contact me.

Sincerely,


for D. Frank Wright

DFW/tr
Enclosures

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Universal Drywall Contractors, Inc.
(Name of corporation)

DOCUMENT NUMBER: P02000025570

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:

Emilio Quevedo
(Name of contact person)

Universal Drywall Contractors, Inc.
(Firm/Company)

3430 Danny Bryan Boulevard
(Address)

Tampa, Florida 33619
(City/state and zip code)

For further information concerning this matter, please call:

Emilio Quevedo at (813) 627-9888
(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
409 E. Gaines Street
Tallahassee, FL 32399

**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: Universal Drywall Contractors, Inc.
2. The principal office address: 3430 Danny Bryan Boulevard
Tampa, Florida 33619
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03/08/02 Document number: P02000025570

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Katherine Quevedo

3430 Danny Bryan Boulevard

Tampa, Florida 33619

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

Emilio Quevedo

3430 Danny Bryan Boulevard

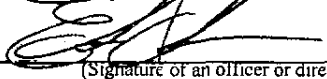
(P.O. Box NOT acceptable)

Tampa, Florida 33619

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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

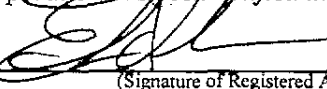
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Emilio Quevedo, President

(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)

1/31/05
(Date)

If signing on behalf of an entity:

N/A

(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