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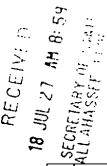
From:

Account Name : PAVESE LAW FIRM Account Number : 120130000057 Phone : (239)334-2195 Fax Number : (239)332-2243

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE CAMPBELL ROOFING & SHEET METAL OF FLORIDA, IN



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JUL 3 0 2018

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: Campbell Roofing & Sheet Metal of Florida, Inc.	
2. The principal office address: 911 SE 15th Avenue, Cape Coral, FL 33990	
3. The mailing address (if different): Same	
4. Date of incorporation/qualification: 06/24/2002 Document number: P02000069588	
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)	
Travis Scott Campbell Scott Campbell	388
911 SE 15th Avenue	1018 JUL 27 AM
Cape Coral, FL 33990 6. The name and street address of the new registered agent (if changed) and for registered office	21
6. The name and street address of the new registered agent (if changed) and for registered office (if changed): Frank Pavese, Jr. c/o Pavese Law Firm	M 9: 07
4632 Vincennes Blvd., Suite 101	
P.O. Box NOT ecceptable Cape Coral, FL 33904	
The street address of its registered office and the street address of the business office of its registered agen as changed will be literated.	it,
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.	
x Tach (ambell	
Signature of an officer or director	
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.	
Moule Aule Daid 35, 2018 Signature of Registered Agent Daid	
If signing on behalf of an entity:	
Frank Brone, Je Esquie	

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