## P03000007886

(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



500132306495

07/07/08--01026--003 \*\*35.00

FILED

08 JUL -7 AM II: 13

SECRETARY OF STATE
ALLAHASSEF F. STATE

R.A. Charge

6. Coulliste JUL 0 8 2008

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: Contract Specialties, Inc. (Name of Corporation)				
DOCUMENT NUMBER: P03000007886				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fili	ng.			
Please return all correspondence concerning this matter to the following:				
William L. Meyer (Name of Contact Person)				
Contract Specialties, Inc. (Firm/Company)				
1346 Marsh Harbor Drive (Address)				
Jacksonville, FL 32225-2643 (City/State and Zip Code)				
For further information concerning this matter, please call:				
William L. Meyer at (904) 220-0295 (Name of Contact Person) at (400 Area Code & Daytime Teleph	none 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 ( Tallahassee, FL 32301				

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 61 ange is submitted for a corporation organized under the law er to change its registered office or registered agent, or both	s of the State of _	Florida
1. The name of t	the corporation: Contract Specialties, Inc.		
	office address: 1346 Marsh Harbor Drive		
3. The mailing a	address (if different):		····
4. Date of incorp	poration/qualification: 01/21/2003 Document n	umber: <u>P03000</u>	007886
	d street address of the current registered agent and registered rtment of State:	l office on file wit	h the
	William L. Meyer		
	2646 Edgewater Drive		_
	Weston, Florida 33332-3400		TAL TAL
6. The name and (if changed):	d street address of the new registered agent (if changed) and	/or registered offi	CRETA
	William L. Meyer		SEE
	1346 Marsh Harbor Drive		of Si
	(P.O. Box NOT acceptable)  Jacksonville, FL 32225-2643		I3 RID,
	ess of its registered office and the street address of the bulbe identical.		
Such change wa	as authorized by resolution duly adopted by its board of coporation has been notified in writing of	lirectors or by an of the change.	officer so
(Signati		ited or typed name and t	
I hereby accept I further agree to of my duties, an document is bei corporation hay	t the appointment as registered agent and agree to act in to comply with the provisions of all statutes relative to the dI am familiar with and accept the obligation of my posing filed merely to reflect a change in the registered officing of this change.	this capacity. e proper and com ition as registered e address, I hereb	aplete performance d agent. Or, if this by confirm that the
well	nt	7-61-	2008
	gnature of Registered Agent) chalf of an entity:	(Date)	
	Typed or Printed Name)		