P03000043905

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	» #)
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Turner Home Repairs, Inc. (Name of Con	rporation)
DOCUMENT NUMBER: P03000043905	
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter t	to the following:
John Turner (Name of Cont	act Person)
Turner Home Repairs, Inc. (Firm/Con	npany)
4169 Summer Breeze Drive (Addre	ess)
Fernandina Beach, FL 32034 (City/State and	Zin Code)
For further information concerning this matter, please ca	
John Turner (Name of Contact Person)	at (904) 753-2860 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departm	nent 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

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

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Pursuant to the provisions of sections 607.0502, 617.05 statement of change is submitted for a corporation orga in order to change its registered office or regi	anized under the laws of the State of Florida
1. The name of the corporation: Turner Home Repairs,	, Inc.
The principal office address: 4169 Summer Breeze Fernandina Beach, FL 32034	
 The mailing address (if different): 4169 Summer Br Fernandina Beach, FL 32034 	reeze Drive
4. Date of incorporation/qualification: 04/17/2006	Document number: P03000043905
5. The name and street address of the current registered Florida Department of State:	
John Turner	
122 N 15th Street	一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一
Fernandina Beach, FL 32034	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6. The name and street address of the new registered ag (if changed): The Turner 4169 Summer Breeze Drive	gent (if changed) and /or registered office
(P.O. Box NOT acceptal	
Fernandina Beach, FL 32034	<u> </u>
The street address of its registered office and the stre as changed will be identical.	eet address of the business office of its registered agent,
Such change was authorized by resolution duly adop authorized by the board, or the corporation has been	nted by its board of directors or by an officer so notified in writing of the change.
(Signature of an officer or director)	John Turner, President (Printed or typed name and title)
I hereby accept the appointment as registered agent I further agree to comply with the provisions of all st of my duties, and I am familiar with and accept the o document is being filed merely to reflect a change in corporation has been notified in writing of this change.	and agree to act in this capacity. tatutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this the registered office address, I hereby confirm that the ge.
John June	03/13/06 (Date)
(Signature of Registered Agent)	(Dail)
If signing on behalf of an entity:	
(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 (8/05)