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(Re	equestor's Name)
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FILED 05 JAN 18 AN 11: 33 SECFETARY OF STATE FALLAN SEE, FLORIDA

ADR 1/18/05



COBPORATION SERVICE COMPANY'

ACCOUNT NO. : 072100000032

REFERENCE : 136052

AUTHORIZATION :

136052 7417087 Patricia Pijuto

4

COST LIMIT : \$ 35.00

ORDER DATE : January 11, 2005

ORDER TIME : 11:32 AM

ORDER NO. : 136052-110

CUSTOMER NO: 7417087

CUSTOMER: Regina M. Kilgallen-burde Benjamin Moore & Co. 51 Chestnut Ridge Road

Montvale, NJ 07645

CHANGE OF AGENT

NAME: BROWARD PAINT CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER: ___

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

1. The name of the corporation: BROWARD PAINT CORPORATION

2. The principal office address: 3945 West Broward Boulevard, Fort Lauderdale, FL

The mailing address (if different):

- 4. Date of incorporation/qualification: August 19, 2003 Document number: 203000090923
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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

Corporation Service Company 1201 Hays Street (P.O. Box NOT acceptable) Tallahassee, FL 32301

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)

Maureen Cullen, Attorney in Fact (Printed of typed name and title)

(Date)

January 10, 2005

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 ani 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.

Corporation Service Company By ignature of Registered Agent,

If signing on behalf of an entity:

Jacqueline M. Giles, Asst. Vice President

(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