

P030000130663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

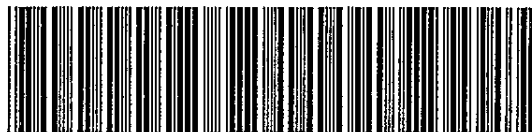
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mark Normandin's Old to New Restoration, Inc
(Name of corporation)

DOCUMENT NUMBER: P03000130663

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:

Mark Normandin
(Name of contact person)

Mark Normandin's Old to New Restoration, Inc
(Firm/Company)

86529 Hester Dr
(Address)

Yulee FL 32097
(City/state and zip code)

For further information concerning this matter, please call:

Mark Normandin at (904) 225-9250
(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: Mark Normandin's Old to New Restoration, Inc.
2. The principal office address: 86529 Hester Dr
Gulley Fl 32097
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/12/2003 Document number: PD 300013063
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Active Filings, LLC
10651 Northeast 11th Court
Miami Shores, Fl 33138

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

Mark Normandin
86529 Hester Dr
(P.O. Box NOT acceptable)
Gulley Fl 32097

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.

Mark Normandin
(Signature of an officer or director)

Mark Normandin 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.

mark normandin
(Signature of Registered Agent)

12/29/04
(Date)

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

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DIVISION OF STATE
TALLAHASSEE, FLORIDA