

P030000134516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

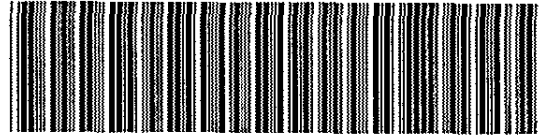
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

RA/RO/chg
(1a) 8/28/07



400105909884

08/23/07--01023--005 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 23 PM 12:08



Belinda T. France
Attorney
Master of Laws in Taxation

August 22, 2007

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: Pat's Roofing & Repair, Inc.

Dear Sir/Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations along with our filing fee in the amount of \$35. Also enclosed is a copy of the signed document which we ask that you stamp filed and return it to this office in the enclosed self-addressed, stamped envelope.

Thank you for your assistance.

Sincerely,

A handwritten signature in cursive script that reads 'Marti Womble'.

Marti Womble
Legal Assistant to Belinda T. France, Esq.

:Enclosures as stated

**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: Pat's Roofing & Repair, Inc.
2. The principal office address: 5865 Aucilla Road, Monticello, FL 32344
3. The mailing address (if different): _____
4. Date of incorporation/qualification: January 1, 2004 Document number: P03000134516
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Pat Lamb

8565 Aucilla Road

Monticello, FL 32344

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

Belinda T. France

1625 Summit Lake Drive, #240

(P.O. Box NOT acceptable)

Tallahassee, Florida 32317

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.

Pat Lamb
(Signature of an officer or director)

Patrick Lamb, 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.

Belinda T. France
(Signature of Registered Agent)

8/21/07
(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
CR2E045 (8/05)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 23 PM 12:08