P030001557a4

-5 StAR 2962 Palm HA		
(City/	State/Zip/Phor	_
	ness Entity Na ument Number	,
Certified Copies	Certificate	es of Status
Special Instructions to Fi	ling Officer:	

Office Use Only

(Requestor's Name)



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10/20/05--01040--005 **35.00

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

The state of the s

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

statement of change is submitted for a corporation organized under the laws of the State of Horda. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: 5 STAR Flooring TNC.
2. The principal office address: 2962 CARA CT PAIM HARbor FI 34684
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/22/2003 Document number: P03000155724
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
ERIC Douglass
3267 Hibiscus DR
FAIM HARbor Fl 34684
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DARRell Congdon
2962 Cara Ct (PO. Box NOT acceptable)
Palm Harbor F1 34684 FS 3 B
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.
Handl D Grade DARREII Conacton Vice President
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.
famell O Corgh y 10/17/05
(Signature of Degistered Agent) (Date) If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *