## PON0000 86075

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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	· ·
	Office Use Only	/



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## **COVER LETTER**

TO: Amendment Section Division of Corporations SUBJECT: ACTION CODING: Heating Inc. Name of Corporation DOCUMENT NUMBER: PO40000 86075

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:

liam ٦N City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ά. WWW at ode & Daytime Telephone Number Contact Person Name of

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> 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

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 ADNAA\_\_\_\_\_\_\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: 7 2. The principal office address: .0 3. The mailing address (if different):\_ Document number: <u>40400086075</u> 4. Date of incorporation/qualification: June 2004 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) 110 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): P.O. Box NOT acceptable 291UY The street address of its registered office and the street address of the business office of its registered agent, as changed Nical. zed by resolution duly adopted by its board of directors or by an officer so or the corporation has been notified in writing of the change. or directo tment as registered agent and agree to act in this capacity. With the provisions of all statutes relative to the proper and complete performance filiar wilh and accept the obligation of my position as registered agent. Or, if this prely to reflect a change in the registered office address, I hereby confirm that the fied in writing of this change. Registered Agent If signing on behalf of an entity: tion Cooling Heating, Inc. ám

\* \* \* 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)

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