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## **COVER LETTER**

Division of Corporations

SUBJECT: 5 Kyhigh Siding Rosting, INC

DOCUMENT NUMBER: P05 000078847

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:

Kene Jaimes
Name of Contact Person

Skyhigh Siding & Rooting, INC

901 Northpoint Parkway, #204

Address

West Palm Beach FL 33407

City/State and Zip Code

Tene Dskyhigh root.com

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

For further information concerning this matter, please call:

Rene Jaimes at (561) 848-3053

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

## 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.
1. The name of the corporation: Skyhigh Siding & Rooting, INC
2. The principal office address: 901 Northpoint Parkway #204 West Palm Beach FL 33407
3. The mailing address (if different):
4. Date of incorporation/qualification: 05 31 2005 Document number: P05 00 00 7884
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)
Nudia Navas
901 Northpoint Parkway, #204 West Palm Beach FL 38407
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Rene Jaimes  901 Northpoint Parkway, #204  West Palm Brach FL 33407
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.    Diwd
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.
Signature of Registered Agent  Date
If signing on behalf of an entity:
Rene Jaimes 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)