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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: SOUTH COAST MIRROR AND GLASS, INC. (Name of Corporation)
DOCUMENT NUMBER: P05000125381
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:
ROBERT MYERS (Name of Contact Person)
ROBERT MYEKS, LLC C/O COATS & HSSOC., P.A.
5200 NW 33 AVE., STE. 214 (Address)
FT. LAUDERDALE, FL 33309 (City/State and Zip Code)
For further information concerning this matter, please call:
ROBERT MYERS at (954) 483-6577  (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

## 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: SOUTH COAST MIRROR AND GLASS, INC.
2. The principal office address: 1900 NW 33 COURT #12
POMPAND BEACH, FL 33064
3. The mailing address (if different):
4. Date of incorporation/qualification: 09 / 12 / 2005 Document number: P05000 1253
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
WILLIAM RODGERS
1900 NW 33 COURT #12
POMPAND BEACH, FL 33064 BE &
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ROBERT SWORD
1900 NW 33 COURT #12 57 57 57 58 1900 NOT acceptable)
POMPANO BEACH, FL 33064
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.
(Signature of an officer or director)  Thereby accept the appointment as registered agent and garee to act in this capacity.
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:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE; \$35.00 \* \* \*