## P05000147035

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
|                         |                    |             |
| (Ac                     | ldress)            |             |
|                         | ·· .               |             |
| (Ac                     | ldress)            |             |
|                         |                    |             |
| (Ci                     | ty/State/Zip/Phon  | e #)        |
| `                       | •                  | •           |
| PICK-UP                 | WAIT               | MAIL        |
| _                       | _                  |             |
|                         | ısiness Entity Nar | ,<br>na)    |
| (BC                     | isiness Entity Nai | ne,         |
| (D.                     |                    |             |
| (DC                     | ocument Number)    |             |
|                         |                    |             |
| Certified Copies        | _ Certificates     | s of Status |
|                         |                    |             |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
| •                       |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |

Office Use Only



400184836994

registered address Change

09/01/10--01021--008 \*\*35.00

SECRETARY OF STATE

AB 3/10

## **COVER LETTER**

| TO: Amendment Section Division of Corporations                    |                                     |
|---|-------------------------------------|
| SUBJECT: Apex Home Improvement                                    | nts Inc.                            |
| SUBJECT: Apex Home Improvement Name of Corporation                | n                                   |
| DOCUMENT NUMBER: P0500014   | 7035                                |
| The enclosed Statement of Change of Registered Office/Agent a     | and fee are submitted for filing.   |
| Please return all correspondence concerning this matter to the fo | ollowing:                           |
|   |                                     |
| Jack Penny Name of Contact Per                                    | <u>-</u>                            |
| Name of Contact Pers  | son                                 |
|   |                                     |
| Firm/Company  |                                     |
|   |                                     |
| 184 Franklin Roa  | ad                                  |
| Address   |                                     |
|   |                                     |
| Lake Mary, FL 327<br>City/State and Zip Co                        | 746                                 |
| City/State and Zip Ct   | ode .                               |
| jpenny2385@aol.co E-mail address: (to be used for future an       | om                                  |
| E-mail address: (to be used for future an                         | nual report notification)           |
| For further information concerning this matter, please call:      |                                     |
| Jack Penny of (   | 407 ) 314-6459                      |
| Jack Penny at (   | rea Code & Daytime Telephone Number |
| Enclosed is a \$35.00 check made payable to the Department of     | State.                              |
| Mailing Address: Amendment Section                                | Street Address: Amendment Section   |
| Division of Corporations  | Division of Corporations            |
| P.O. Box 6327   | Clifton Building                    |
| Tallahassee, FL 32314   | 2661 Executive Center Circle        |

Tallahassee, FL 32301

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

| statement of cha                   | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida ir to change its registered office or registered agent, or both, in the State of Florida.   |
|------------------------------------|---|
|                                    |   |
|                                    | the corporation: Apex Home Improvements Inc. office address: 184 Franklin Road  |
| 2. The principal                   | Leke Many El 20740  |
| 3. The mailing a                   | ddress (if different):  |
| 4. Date of incorp                  | poration/qualification: 11/3/2005 Document number: P05000147035   |
|                                    | d street address of the current registered agent and registered office on file with the street of State: (If resigned, enter resigned)  |
|                                    | Jack Penný  |
|                                    | 1170 Tree Swallow Dr. Suite 345   |
|                                    | Winter Springs, FL 32708  |
| 6. The name and (if changed):      | Winter Springs, FL 32708  I street address of the new registered agent (if changed) and /or registered office  184 Franklin Road  P.O. Box NOT acceptable   |
|                                    | 184 Franklin Road   |
|                                    | · · · · · · · · · · · · · · · · · · ·   |
|                                    | Lake Mary, FL 32746   |
| The street address changed will    | ess of its registered office and the street address of the business office of its registered agent, be identical.   |
| Such change wa<br>authorized by th | as authorized by resolution duly adopted by its board of directors or by an officer so<br>ne board, or the corporation has been notified in writing of the change.  |
|                                    | Jack Penny, President Printed or typed name and title   |
|                                    | the appointment as registered agent and agree to act in this capacity.  To comply with the provisions of all statutes relative to the proper and complete performance and familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change. |
| - 512                              | 8-24-2010 Date  |
|                                    | chalf of an entity:   |
| T                                  | yped 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)