P0600 609 1001

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

KHM RAChange

COVER LETTER

SUBJECT:	SUBJECT: Industrial Builders Corporation				
(Name of Corporation)					
DOCUMENT NUMBER:	P0600009	11001			
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:					
		•			
Carlos J. Quezada					
(Name of Contact Person)					
Industrial Builders Corp.					
(Firm/Company)					
9966 Hidden Dunes Ln					
(Address)					
Orlanda El 22022					
Orlando, Fl 32832 (City/State and Zip Code)					
For further information concerning this matter, please call:					
	•				
Carlos J. Qu	ezada	at (321) 331-4537 (Area Code & Daytime Telephone Number)			
(Name of Contac	t Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35,00 check made payable to the Department of State.					
Mailing	Address: ment Section	Street Address: Amendment Section			
	n of Corporations	Division of Corporations			
	ox 6327	Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

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

statement of char	provisions of sections 607.0502, 617.0. nge is submitted for a corporation org	anized under the laws of the State of _	<u>Florida</u>
_	to change its registered office or regi		torida.
1. The name of th		ers corporation.	
2. The principal of	office address: 8228 Summerville	Dr. Orlando, Fl 32829	
3. The mailing ad	ldress (if different):		
4. Date of incorpo	oration/qualification: July 10,2006	Document number: P0600	0091001
5. The name and Florida Departs	street address of the current registered ment of State:	I agent and registered office on file wi	th the
-	9966 Hidden Dunes	Ln Orlando,Fl 32832	·-
-			<u> </u>
6. The name and (if changed):	street address of the new registered ag	gent (if changed) and /or registered off Or. Orlando, Fl 32829	ice of SE
	(P.O. Box NOT acceptal	ble)	LARY OF ST LARY OF ST
The street address as changed will to	ss of its registered office and the stre be identical.	et address of the business office of i	ts registered agent,
Such change was authorized by the	s authorized by resolution duly adop e board, or the corporation has been	need by its board of directors or by an notified in writing of the change.	officer so
(Signatur	e of an other of director)	Carlos J. Quezada (Professional Carlos J. Quezada (Professiona Carlos J. Q	
I hereby accept to I further agree to of my duties, and document is bein corporation	the appointment as registered agent o comply with the provisions of all si d I am familiar with and accept the o ng filed merely to reflect a change in Been notified in writing of this chan	and agree to act in this capacity, tatutes relative to the proper and conbligation of my position as registere the registered office address, I here ge	nplete performance of agent. Or, if this by confirm that the
	nature of Registored Agent)	Sep. 12, 2006 (Date)	
If signing on beh	nalf of an entity:		
	los J. Quezada	• e.	

* * * 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).