P06000113737

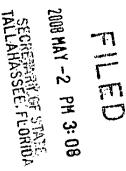
(Reque	stor's Name))
(Addre	ss)	
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(City/S	tate/Zip/Phon	ne #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Na	me)
(Docur	nent Number)
Certified Copies	Certificate	s of Status
Special Instructions to Filir	ng Officer:	

Office Use Only



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RAChange Thewis 5-7-08

COVER LETTER

Division of Con	porations	
SUBJECT:	Get It Done Tile	
	(Name of Cor	poration)
DOCUMENT NUMBE	R: P0600011373	7
The enclosed Statement	of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondent	ondence concerning this matter to	the following:
Sus	an L. Hamzik	
	(Name of Conta	act Person)
Get	It Done Tile, Inc.	
	(Firm/Com	pany)
		•
P.O. Box 229238		
	(Addres	35)
Glen	wood, FL 32722-9238	
Olera	(City/State and	Zip Code)
For further information of	concerning this matter, please cal	1:
Susan L. Hamzik		
	f Contact Person)	at (386) 736-3893 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 che	eck made payable to the Departm	ent of State.
	Mailing Address:	Street Address: Amendment Section
	Mailing Address: Amendment Section	Amendment Section Division of Corporations
	Division of Corporations P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
•		Tallahassee, FL 32301
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and a control ways	اختجا بشيعة ومهامها ومهامها ومهامها	en e

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 nge is submitted for a corporation organized under the laws of the State of Florida
	r to change its registered office or registered agent, or both, in the State of Florida.
	he corporation: Get It Done Tile, Inc.
2. The principal	office address: 2999 Trevor Lane, Glenwood, FL 32720
3. The mailing a	ddress (if different): P. O. Box 229238, Glenwood, FL 32722-9238
4. Date of incorp	poration/qualification: September 1, 2006 Document number: P06000113737
	street address of the current registered agent and registered office on file with the tment of State:
	All Florida Firm, Inc.
	813 Deltona Blvd., Ste. A
	Deltona, FL 32725-7154
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Susan L. Hamzik
	ين بي 2999 Trevor Lane
	(P.O. Box NOT acceptable)
	Glenwood, FL 32720
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Susan	L Hamvik, President Susan L. Hamzik, President (Printed or typed name and title)
of my duties, an document is bei	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 ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
Susan	April 28, 2008 prature of Registered Agent) (Date)
If signing on be	chalf of an entity:
	Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *