P10000028572

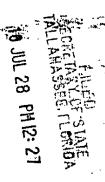
(Requestor's Name)				
(Ad	dress)			
	•			
(Address)				
— · (Cit	y/State/Zip/Phone	• #)		
PICK-UP	WAIT	MAIL		
, .				
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
w _gs - s				
				

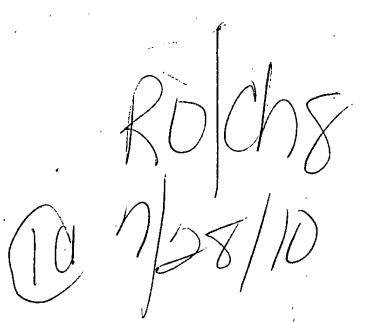
Office Use Only



000183085770

07/19/10--01057--002 **70.00





COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: PROFES	SIONAL HARD'	WOOD FLOC e of Corporation	DRING INS	TALL
* ·	- ;"	•	:: ;	•
DOCUMENT NUMBER:		P100000285	72 - 1	·
The enclosed Statement of	Change of Registered	Office/Agent and	fee are submitte	ed for filing.
Please return all correspond	lence concerning this	matter to the follo	wing:	••
	_			
		avid Casals of Contact Person		
	Name	of Contact Person		
		ce of David Cas	sals _	
	F	irm/Company	- 1	
,	•			
	6600 Sc	outh Dixie Highv	vav	
		Address		
,				
<u> </u>	West Palm City/S	Beach, Florida, tate and Zip Code	33405	<u> </u>
	City/s	nate and Zip Code		
	dcpalav	v@comcast.cor	n .	•
E-mail	address: (to be used			cation)
				•
For further information cor	cerning this matter, p	lease call:		
David	Casals	at (56	· · · · · · · · · · · · · · · · · ·	249-6515
Name of Co	ntact Person		Code & Daytin	ne 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 20, 2010

DAVID CASALS LAW OFFICE OF DAVID CASALS 6600 SOUTH DIXIE HIGHWAY WEST PALM BEACH, FL 33405

SUBJECT: PROFESSIONAL HARDWOOD FLOORING INSTALLATION, INC.

Ref. Number: P10000028572

We have received your document for PROFESSIONAL HARDWOOD FLOORING INSTALLATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please list the registered agent in part 5 and 6 of the form and sign in the space provided for the agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 810A00017548

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

statement of ch	ange is submitted for a corpor	102, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ration organized under the laws of the State of Florida The control of the State of Florida.
* 1		SSIONAL HARDWOOD FLOORING INSTALLATI
	•	h Dixie Highway, West Palm Beach, Florida,33405.
2. The principal	office address: 0000 Codi	
·	<u> </u>	
3. The mailing	address (if different):	
4. Date of incor	poration/qualification:0	3/31/2010 Document number: P10000028572
5. The name an Florida Depa	rtment of State: (If resigned, a	registered agent and registered office on file with the center resigned Casals Dovid Casals 205 W PALM BEACH FL 33407
	•	
		To a second seco
6. The name and (if changed):	David Cas	gistered agent (if changed) and /or registered office Way, West Palm Beach, Florida, 33405 P.O. Box NOT acceptable
-		P.O. Box NOT acceptable
The street addr	ess of its registered office an be identical.	d the street address of the business office of its registered agent,
Such change wauthorized by	authorized by resolution of board, or the corporation	luly adopted by its board of directors or by an officer so has been notified in writing of the change.
Med	uld Cont	David Casals
I hereby accept I further agree of my duties, an document is bei corporation ha	the appointment as register to comply with the provision of lam familiar with and acting filed merely to reflect a complete in writing of the control of the	ed agent and agree to act in this capacity. s of all statutes relative to the proper and complete performance cept the obligation of my position as registered agent. Or, if this change in the registered office address, I hereby confirm that the this change.
Mar	id Chi	06/30/2010
_	nature of Registered Agent	Date
It signing on be	half of an entity:	
· T	David Casals	

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