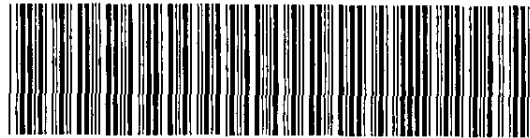


P12000048511

(Requestor's Name)



100251962041

F+M Flooring, INC.
15191 Cedarwood Lane # 2204
Naples FL 34110

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

09/30/13--01059--017 **35.00

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

19 SEP 30 PM 3:12

FILED

R/A Chg

OCT -7. 2013

R. WHITE

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

FAX:

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ETM FLOORING INC
2. The principal office address: 285 NAPLES COVE DR. #1304
NAPLES FL 34110
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/24/2012 Document number: P12000048541
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RESIGNED

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

EDUARDO T. MAGGI

285 NAPLES COVE DR. #1304

P.O. Box NOT acceptable

NAPLES, FL 34110

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

Printed or typed name and title

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.

Eduardo T. Maggi
Signature of Registered Agent

09/23/13
Date

If signing on behalf of an entity:

EDUARDO T. MAGGI
Typed 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 (03/12)

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13 SEP 30 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA