## P12000076611

|                         | · -                  |            |
|-------------------------|----------------------|------------|
| 945 Ric                 | HOND AVE             | <u>-</u> , |
| MIN                     | - <u>.</u>           |            |
|                         | 32957                |            |
|                         |                      |            |
| •                       |                      |            |
| (Address)               |                      |            |
|                         |                      |            |
|                         |                      |            |
| (Cit                    | ty/State/Zip/Phone # | )          |
|                         |                      |            |
| PICK-UP                 | WAIT                 | MAIL       |
| _                       |                      |            |
|                         |                      |            |
| (Bu                     | siness Entity Name)  | 1          |
| ·                       |                      |            |
|                         |                      |            |
| (Document Number)       |                      |            |
|                         |                      |            |
| Code d Code             | O-41511              |            |
| Certified Copies        | _ Certificates of    | Status     |
|                         |                      |            |
|                         |                      |            |
| Special Instructions to | Filing Officer:      |            |
|                         |                      | ŀ          |
|                         |                      | ļ          |
| ii                      |                      | . [        |
|                         |                      |            |
|                         |                      |            |
|                         |                      |            |
|                         |                      |            |
| ]                       |                      |            |
|                         | · <del></del>        |            |

Office Use Only



800242407338

12/07/12--01014--008 \*\*35.0

RANG of



DEC 0 7 2012

T. ROBERTS

DEC 0 7 2012

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

| 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   |
|--|
| 1. The name of the corporation: p&j carpets and more, FEIN 46-1261149  |
| 2. The principal office address: 800 S. COUNTWAEY PKWY  5931 Unicorp. MErritt Island FL. 32952   |
| 5931 Unicorp. MErritt Island FL. 32952   |
| 3. The mailing address (if different): 1000 s tropical trail   |
| merritt island fl,32952  |
| 4. Date of incorporation/qualification: 9/10/2012 Document number: P12000076611  |
| 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)   |
| Jessica Sayre  |
| 1000 South tropical trail  |
| Merritt island fl, 32952   |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  |
| Paul St.pierre   |
| Paul St.pierre  965 Richland ave   |
| P.O. Box NOT acceptable  |
| Merritt island, fl 32953   |
| 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.  |
| Lessica Sayre  |
| 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. |
| Gay St. Freize 12/01/12 Signature of Registered Agent Date   |
| If signing on behalf of an entity:   |
| Parl St. DiFREF Typed or Printed Name  |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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