## P36085

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## PREMIER CORPORATE SERVICES, INC.

208 South LaSalle Street, Suite 1855 Chicago, IL 60604 (312) 346-3606 (800) 934-2556 Fax: (312) 346-3607

October 8, 2003

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State 409 E. Gaines Street Tallahassee, FL 32399

RE: Crown Commercial Builders, Inc.

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Tony Alexander

TA/smc. Encl.

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

this statement o	of change is subn	nitted for a corpora	617.0502, 607.1508, or 617.1 tion organized under the laws	of the State of
Kansas	in order	to change its regist	tered office or registered agen	t, or both, in the State
of Florida.		Crawn Campania	l Diddam In a	
		Crown Commercial		
2. The principa	l office address:	1823 S. Eisenhowe	er Street, Wichita, KS 67209	
3. The mailing	address (if differ	ent): P.O. Box 341	7, Wichita, KS 67201	-
4. Date of incom	rporation/qualific	cation: 10/23/91	Document number	. P36085
5. The name an			ered agent and registered office	on file with the
	CT Corporation	1 System		
	1200 South Pir	ne Island Drive		<del>'''</del>
	Plantation, FL	33324		
6. The name a changed):	nd street address	•	ered agent (if changed) and /c	
	526 E. Park Ave	enue		'생각 <b>o</b>
	Tallahassee, FL		nailbox NOT acceptable)	
The street addr agent, as chang	ess of its registe sed will be identi	red office and the s	street address of the business of	ffice of its registered
Such change wanthorized by t	as authorized by he board, or the	resolution duly ad corporation has been	opted by its board of directors en notified in writing of the ch	or by an officer so ange.
Signature of an office	r, chalfman or vic chai	rman of the board)	Bruce Griffin, Secretary (Printed or typed name and	Title)
I hereby accept I further agree	t the appointment to comply with i	it as registered age the provisions of al	ent and agree to act in this cape Il statutes relative to the prope and accept the obligation of m ed merely to reflect a change in ion has been notified in writing	acity. r and complete
(th)	gnature of Registered	Agent)	(Ol8/03	· · · · · · · · · · · · · · · · · · ·
If signing on beha	-	- •	,	
	J. Alexander		Assistant Secretary	e
NRAI Services,	Typed or Printed Name)	, , , , , , , , , , , , , , , , , , , ,	(Capacity)	

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