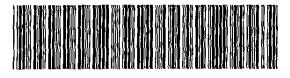
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Sandy W. Maini

Direct Dial: (770) 951-6781 Direct FAX: (770) 303-1134 E-MAIL: smaini@hssw.com

January 17, 2005

Florida Department of State Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

Re: Gulf Coast Insulation & Garage Doors, Inc.

To Whom It May Concern:

Enclosed herewith for filing with the Secretary of State in accordance with the Florida Business Corporation Act, pursuant to Sections 607.0502, Florida Statutes is an original and two conformed copies of the Statement of Change of Registered Office or Registered Agent for the above-referenced entity as well as a check in the amount of \$35.00 for the filing fee in connection with the change in registered office and agent for Gulf Coast Insulation & Garage Doors, Inc., a Florida corporation.

Please file the Statement of Change, and return a file stamped copy or confirmation of filing as well as any correspondence concerning this matter to:

Sandy Maini Hartman, Simons, Spielman & Wood, LLP 6400 Powers Ferry Rd. Suite 400 Atlanta, GA 30339

Thank you for your assistance with this matter. If you have any questions concerning this matter, please call me at 770-951-6781.

Sincerely,

Sandy W. Maini Legal Assistant

SWM Enclosures

cc: Sean J. Coleman, Esq.

D. Penn Hodge

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Gulf Coast Insulation & Garage Doors, Inc.
 the name of The principa 	1 office address: 1380 15th St. West, Riviera Beach, Florida 33404
3. The mailing	address (if different):
4. Date of incor	poration/qualification: 04/13/1995 Document number: P95000028973
	d street address of the current registered agent and registered office on file with the urtment of State:
	Marshall, Fry J
	905 East Martin L King Drive, Ste 228
	Tarpon Springs, Florida 34689
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Vella, David
	c/o Tri City Installations, LLC, 16071 Pinto Road
	(P.O. Box NOT acceptable)
	Ft. Myers, Florida 33903
The street addr as changed wil	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change wanthqrized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
LBJ (Sugnal	ure or an officer or director) Like of an officer or director) Like of an officer or director)
I hereby accept I further agree of my duties, an document is be	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 and familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speep notified in writing of this change.
	1/14/05
	gnature of Registered Agent) (Date)
n signing on of	man or an entry.
	Typed or Printed Name)

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