P96000031901

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Trademark

Other

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time Photocopy, Certificate of Status Mail out Will wait **NEW FILINGS** AMENDMENTS: Profit Amendment 600002115926--6 -03/18/97--01041--003 *****35.00 *****35.00 NonProfit Resignation of R.A., Officer/Director **Limited Liability** Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHERTIINGS REGISTRATION/ OUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Examiner's Initials

Charter No.: P96000031901 Date Filed: April 12, 1996

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

- 1. The name of the corporation is World Coatings International, Inc.
- 2. The name and address of its present registered agent is:
 Corporation Service Company
 1201 Hays Street
 Tallahassee, Florida 32301
- 3. The name and street address to which its registered agent is to be changed is:

Robert A. Meader 9621 Brookdale Drive New Port Richey, Florida 34655

- 4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.
- 5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Date: Mauch 12, 1991 Signature: Robert A. Meader, Director

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name: Robert A. Meader Signature: Robert A. Meader Date: Marsh 12 1991	97 MAR 17 SEGRETAR TALLAHASS
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