

P97000035346

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : HOLBROOK, AKEL, COLD, RAY & REICHARD, P.A.  
Account Number : I20020000128  
Phone : (904) 356-6311  
Fax Number : (904) 356-7330

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE  
NORTH FLORIDA PLUMBING, HEATING AND AIR  
CONDITIONING

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

PA Change

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Corporate Filing Menu

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05-14-14

FILED  
14 MAY 13 PM 5:00

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

1. The name of the corporation: North Florida Plumbing, Heating and Air Conditioning, Inc.
2. The principal office address: 5646 Summerall Road, Jacksonville, FL 32216
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 04/18/1997 Document number: P97000035346
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):

Christopher J. Croft

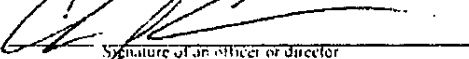
5646 Summerall Road

P.O. Box NOT acceptable

Jacksonville, FL 32216

The street address of its registered office and the street address of the business office of its registered agent as changed will be identical

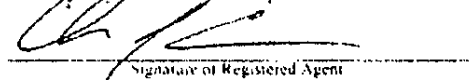
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

CHRISTOPHER J. CROFT, President

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.

  
Signature of Registered Agent

5/13/14

Date

If signing on behalf of an entity:

\_\_\_\_\_  
(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  
(CR21 045 (03/12))

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