97000071483



ACCOUNT NO. : 072100000032

REFERENCE

: 771617

7187011

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE: July 20, 2000

ORDER TIME: 12:51 PM

ORDER NO. :

771617

CUSTOMER NO:

7187011

400003351704--2

CUSTOMER: Ms. Anna Garcia

Encompass Services Corporation

3 Greenway Plaza

Suite 2000

Houston, TX 77046

CHANGE OF AGENT

NAME:

VAN'S COMFORTEMP AIR CONDITIONING, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

EXT. 1133

DIVISION OF CORPORATIONS
DIVISION OF CORPORATIONS
AGINALIAN SEES, FLORIDA

82:E H4 6-9NY 00

RECEIVED

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

	he provisions of sections 607.0502, 617.0 ed corporation organized under the laws of		statutes,
submits the foi the State of Flo	llowing statement in order to change its r	egistered office or registered agent, or t	both, in
2. The mailing	g address of the corporation is: 3 Green	way Plaza, Suite 2000, Houston,	Texas
3. Date of inco	orporation/qualification: 8/15/97	Document number: P970000714	83
4. The name a	nd address of the current registered agent a	nd office:	
	CT Corporation System		2
	1200 South Pine Island Road		
	Plantation, FL., 33324		i comme
5. The name a	nd address of the new registered agent and		2 1
	Corporation Service Company		÷ €
	1201 Hays Street		07
1	Tallahassee, Florida 32301	→	•
The street add agent, as chang	ress of its registered office and the street ged, will be identical.	address of the business office of its re	gistered
Such change vauthorized by t	was authorized by resolution duly adopted the board.	by its board of directors or by an office	er so
Man.	H. Wused	6/14/0	
(Sìgnatu	ire of an officer chairman or vice chairman of the board	(Date)	
Gray/Muzzy	/ - Vice President and Secretary		
	(Printed or typed name and title)		
Having been n corporation, I I further agree performance o registered age	amed as registered agent and to accept ser hereby accept the appointment as registere to comply with the provisions of all statute f my duties, and I am familiar with and acc	vice of process for the above stated d agent and agree to act in this capacity s relative to the proper and complete ept the obligation of my position as	·.
registered age.		2.21.00-	
Ву:	(Signature of Registered Agent)	(Date)	
If signing on behal	If of an entity:		
Karen Wehner		Asst. Vice President	<u>.</u>
	(Typed or Printed Name)	(Capacity)	
	* * * FILING FEE:	\$35.00 * * *	
CR2EO45(7/97)			

P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS