2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000111201

Entity Name: C.Q. INSULATION, INC.

Current Principal Place of Business:

8806 VENTURE COVE

TEMPLE TERRACE, FL 33637

Current Mailing Address:

495 SOUTH HIGH STREET, SUITE 50 COLUMBUS. OH 43215 US

FEI Number: 20-0289994 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PAMELA A. HENSON 04/24/2015

Electronic Signature of Registered Agent

Officer/Director Detail :

Title DIRECTOR Title SECRETARY

Name MILLER, MICHAEL T Name MCBRIDE, SHELLEY A

Address 495 SOUTH HIGH STREET, SUITE 50 Address 495 SOUTH HIGH STREET, SUITE 50

City-State-Zip: COLUMBUS OH 43215 City-State-Zip: COLUMBUS OH 43215

Title ASST. SECRETARY Title PRESIDENT

Name HENSON, PAMELA A Name EDWARDS, JEFFREY W

Address 495 SOUTH HIGH STREET, SUITE 50 Address 495 SOUTH HIGH STREET, SUITE 50

City-State-Zip: COLUMBUS OH 43215 City-State-Zip: COLUMBUS OH 43215

Title VP, CFO Title TREASURER

Name MILLER, MICHAEL T Name LYONS, SCOTT W

Address 495 SOUTH HIGH STREET, SUITE 50 Address 495 SOUTH HIGH STREET, SUITE 50

City-State-Zip: COLUMBUS OH 43215 City-State-Zip: COLUMBUS OH 43215

Title CHIEF ACCOUNTING OFFICER Title COO

Name FRY, TODD R Name ELLIOTT, JAY P

Address 495 SOUTH HIGH STREET, SUITE 50 Address 495 SOUTH HIGH STREET, SUITE 50

City-State-Zip: COLUMBUS OH 43215 City-State-Zip: COLUMBUS OH 43215

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAMELA A. HENSON ASSISTANT SECRETARY 04/24/2015

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 24, 2015

Secretary of State

CC5357828277

Date