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: TOD SMITH

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/23/2017

Electronic Signature of Registered Agent

... . ..

Officer/Director Detail :			
Title	PST	Title	VP
Name	SMITH, TOD	Name	SMITH, GLENNA H
Address	2459 CHICORY LANE 103	Address	2459 CHICORY LANE 103
City-State-Zip:	WINTER PARK FL 32792	City-State-Zip:	WINTER PARK FL 32792

SIGNATURE:

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.

WINTER PARK, FL 32792

Current Principal Place of Business:

DOCUMENT# P03000137586

2459 CHICORY LANE

103

2459 CHICORY LANE 103 WINTER PARK, FL 32792 US

FEI Number: 20-0449060

Current Mailing Address:

Name and Address of Current Registered Agent:

Entity Name: TOD SMITH CARPET INSTALLATIONS, INC.

SMITH, TOD 2459 CHICORY LANE 103 WINTER PARK, FL 32792 US

Date

FILED Apr 23, 2017

Secretary of State

CC7949110055

Certificate of Status Desired: No

Date