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.

VP

SIGNATURE: WAYNE BLACKERBY	
SIGNATURE. WATNE DLAGRERDT	

I

## DOCUMENT# F0300000975

Entity Name: NORTHWEST PLUMBING JACKSONVILLE, INC.

## **Current Principal Place of Business:**

5985 RICHARD ST SUITE 4 JACKSONVILLE, FL 32216

# **Current Mailing Address:**

6310 MABLETON PARKWAY **STE 1000** MABLETON, GA 30126

#### FEI Number: 36-4521655

# Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Electronic Signature of Registered Agent Date **Officer/Director Detail :** Title PD VP Title Name MAHAFFEY, JAMES Name BLACKERBY, WAYNE 6310 MABLETON PARKWAY, STE 1000 Address 6310 MABLETON PARKWAY, STE 1000 Address City-State-Zip: MABLETON GA 30126 City-State-Zip: MABLETON GA 30126 Title VP HUFFSTETLER, MARK Name Address 6310 MABLETON PARKWAY, STE 1000 City-State-Zip: MABLETON GA 30126

Certificate of Status Desired: No

Date

01/21/2016

FILED Jan 21, 2016 Secretary of State CC4300063881

Electronic Signature of Signing Officer/Director Detail