F0600003136

/Deguested	- N(
(Requestor	s Name)
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 12000000195

REFERENCE: 431510 7913599

AUTHORIZATION :

COST LIMIT

ORDER DATE: November 21, 2012

ORDER TIME : 9:10 AM

ORDER NO. : 431510-015

CUSTOMER NO: 7913599

CHANGE OF AGENT

NAME:

KEMCO INC., SPECIALTY

CONTRACTORS

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Texas to change its registered office or registered agent, or both, in the State of Florida.
•	ne corporation: KEMCO, INC., SPECIALTY CONTRACTORS
	office address: 2420 Glenda Lane, Dallas TX 75229
3. The mailing ad	ddress (if different):
4. Date of incorpo	oration/qualification: 04/24/2006 Document number: F06000003136
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
_	Perdue, Tony
	17 Shell Ave., #A2
_	17 Shell Ave., #A2 Ft. Walton Bch FL 32548
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office.
-	Corporation Service Company
_	1201 Hays Street
	P.O. Box NOT acceptable Tallahassee, FL 32301
The street address as changed will be	es of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Hal	Maureen Cathell, Vice President
I hereby accept to I further agree to performance of agent. Or, if this hereby confirm to Corporation	Printed or typed name and title the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I hat the corporation has been notified in writing of this change. 12/7/2012
By: \\ Signa	ature of Registered Agent Date
If signing on beh	alf of an entity:
	, Asst. Vice President
Ту	ped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *