

509700

Florida Department of State
Division of Corporations
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To: Florida Department of State
Division of Corporations
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From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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REGISTERED AGENT CHANGE

ALJOMA LUMBER, INC.

Certificate of Status	0
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10-26-09

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

Pursuant to the provisions of sections 607.0902, 617.0902, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ALJOMA LUMBER, INC.
2. The principal office address: 10300 NW 121 WAY MEDLEY, FL 33178
3. The mailing address (if different): 2801 E BELTLINE AVE, NE GRAND RAPIDS, MI 49525
4. Date of incorporation/qualification: 08/02/1976 Document number: 509700
5. The name and street address of the current registered agent and registered office on file with Florida Department of State: (If resigned, enter resigned)

ALLEN PETERS

10300 NW 121 WAY

MEDLEY, FL 33178

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CT CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

P.O. Box NOT acceptable

PLANTATION, FL 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

MICHAEL R. COLE - TREASURER
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

10/23/09
Date

If signing on behalf of an entity:

Laura Broderick

Typed or Printed Name Assistant Secretary

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

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

CR2E045 (8/05)

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TALLAHASSEE, FLORIDA

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