

MAY-02-2012 13:13
Division of Corporations

F920000000803

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 517-6380

From: Account Name : CTPROCMPLY
Account Number : I20100000053
Phone : (808) 827-3300
Fax Number : (808) 827-5501

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: calofy@agarch.comREGISTERED AGENT CHANGE
AG ARCHITECTURE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Wisconsin in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AG ARCHITECTURE, INC.
2. The principal office address: 1414 Underwood Avenue, Wauwatosa, Wisconsin 53213
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/22/1992 Document number: F92000000603
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

LEGAN, JOSEPH R.
11382 PROSPERITY FARMS ROAD
SUITE 225
PALM BEACH GARDENS FL 33410 US

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

C T Corporation System
1200 South Pine Island Road, Plantation, Florida 33324

P.O. Box NOT acceptable

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, or the board, or the corporation has been notified in writing of the change.

Eugene R. Guskowski, President

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.

24th day of April, 2012

Signature of Registered Agent

Date

If signing on behalf of an entity:

Mark Williams, AVP

Typed or Printed Name

*** 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 (R05)

Fax Audit # H12000/200743