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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

: C T CORPORATION SYSTEM Account Name

Account Number: FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

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

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COR AMND/RESTATE/CORRECT OR O/D RESIGN EINTERNATIONAL CONTRACTORS, INC. OF ILLINOIS

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1/15/2015

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	INTERNATIONAL CONTRACTORS, INC. OF ILLINOIS
2000	Name of Corporation
DOC	F97000002854 UMENT NUMBER:
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
	return all correspondence concerning this matter to the following:
	Tony Wygonski
	Name of Contact Person
	INTERNATIONAL CONTRACTORS, INC.
	Firm/Company
	450 E Starr Ave
	Address
	Columbus OH 43201-3695
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fi	arther information concerning this matter, please call:
	Name of Contact Person at (
Enclo	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
	i attaitassee, i'e 32514 2001 Executive Center Chere

Tallahassee, FL 32301

CR2E045 (03/12)

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

statement of cha	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of LL				
I The name of	the corporation, INTERNATIONAL	CONTRACTORS, INC. OF ILLINOIS				
2. The principal	office address: 977 SOUTH ROUTE	83 ELMHURST, IL 60126				
3. The mailing	address (if different):					
4. Date of incor	poration/qualification: 06/02/1997	Document number: F97000002854				
	d street address of the current regist atment of State: (If resigned, enter r	tered agent and registered office on file with the resigned)				
	CORPORATION SERVICE COMP	ANY				
	1201 HAYS STREET					
	TALLAHASSEE, FL 32301		TAL :			
6. The name and street address of the new registered (if changed):		ed agent (if changed) and /or registered office	CRETA			
	C T Corporation System		SEY SEE			
	c/o C T Corporation System, 1200 S	South Pine Island Road	17 G			
	P.O. Box NOT acceptable					
	Plantation, Florida 33324		IDA A			
The street addi	ress of its registered office and the l be identical.	street address of the business office of its registered	agent,			
Such change wanthorized by	as authorized by resolution duly a the board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.				
تأر عامر حالي	*x"	Danijela Byers Secretary				
	ure of an officer or director	Prinied or typed name and title				
I hereby accep I further agree performance o agent. Or, if it hereby confirm	n the appointment as registered ag to comply with the provisions of a f my duties, and I am familiar with his document is being filed merely n that the corporation has been not	ent and ugree to act in this capacity. Ill statutes relative to the proper and complete and accept the obligation of my position as register to reflect a change in the registered office address, t lifted in writing of this change.	ed			
C T Co By:	rporation 80 stefn	01/15/2015				
	gnature of Registered Agent	Date				
If signing on b	ehalf of an entity:					
Jordan Brown						
	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 (03/12)