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CORPORATION SERVICE COMPANY

ACCOUNT	NO.	•	120000000195
	110.	•	120000001

REFERENCE: 373985 7904659

AUTHORIZATION

COST LIMIT : \$35,00

ORDER DATE: October 8, 2012

ORDER TIME : 10:27 AM

ORDER NO. : 373985-013

CUSTOMER NO: 7904659

## CHANGE OF AGENT

NAME: KLEINSCHMIDT ASSOCIATES

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret

EXAMINER'S INITIALS:

## 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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.
I. The name of the corporation: KLEINSCHMIDT ASSOCIATES INC.
2. The principal office address: 141 Main St., Pittsfield, ME 04967
3. The mailing address (if different):
1. Date of incorporation/qualification: 05/10/2004 Document number: F04000002559
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)
C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324 US
1200 South Pine Island Road  Plantation, FL 33324 US  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Corporation Service Company  1201 Hays Street
Corporation Service Company
1201 Hays Street
P.O. Box NOT acceptable
Tallahassee, FL 32301
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.
Maureen Cathell, Vice 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 proper and Lam 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.  Corporation Service Company
By: Signature of Registered Agent Date
If signing on behalf of an entity:
Sylvia Queppet, Asst. Vice President  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)