F9200000601

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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04/16/14--01023--016 **35.00

SECRETARIES SEE FLORIDA

APR 23 2014 C. CARROTHERS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Holmes aholmes1@cscinfo.com

Date: April 14, 2014

Order#: 074739-015

Re: SHADE SYSTEMS ENTERPRISES INC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Anthony Holmes

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	orovisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or registe	ized under the la	ws of the State of	Georgia	
1. The name of t	he corporation: SHADE SYSTEMS ENT	ERPRISES, INC			
2. The principal	office address: 130 Walter Way, Fayette	ville, GA 30214			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 11/23/1992	Document	number: F92000	000601	
	street address of the current registered a tment of State: (If resigned, enter resigne	~ -	ed office on file v	vith the	
	C T Corporation System			_	
	1200 South Pine Island Road				
	Plantation	FL	33324	-	
6. The name and (if changed):	street address of the new registered ager	nt (if changed) ar	nd /or registered o	SECRETARY SECRETARY	
	Corporation Service Company			ASSISTANCE OF THE PASSISTANCE OF	
	1201 Hays Street				
	P.O Box NOT Tallahassee	acceptable FL	32301	AH O: Y	
The street addre as changed will	ss of its registered office and the street abe identical.	address of the bu	isiness office of i	ts registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been not	by its board of cified in writing	directors or by an of the change.	officer so	
12		Dona Priebe		Vice President	
Signation	an officer or director		ed or typed name and ti	tle	
I further agree to performance of agent. Or, if thi hereby confirm	the appointment as registered agent and o comply with the provisions of all state my duties, and I am familiar with and a state is document is being filed merely to reflect that the corporation has been notified in Service Company	ites relative to th	ne proper and con tion of my positio	n as registered	
By: Sylin	august	04/14/2014			
	nature of Registered Agent		Date		
If signing on bel	half of an entity:				
Sylvia Queppet	, Assistant Vice President				
Ty	ped or Printed Name				