

174144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

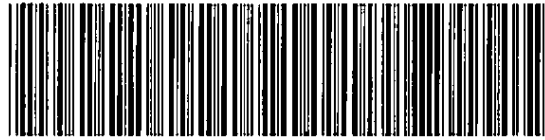
(Document Number)

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U.S. DEPARTMENT OF THE TREASURY
INTERNAL SECURITY

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03/24/20

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5/15/20



2020 MAR 13 AM 10:25

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 12, 2020

STACY ROMICK
1601 S FRONTAGE RD
PLANT CITY, FL 33563

SUBJECT: LINDER INDUSTRIAL MACHINERY COMPANY
Ref. Number: 174144

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore
Regulatory Specialist II

Letter Number: 120A00005509

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Linder Industrial Machinery Company
Name of Corporation

DOCUMENT NUMBER: 174144

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stacy Romick
Name of Contact Person
Linder Industrial Machinery Company
Firm/Company
1601 S. Frontage Rd
Address
Plant City, FL 33563
City/State and Zip Code

Stacy.Romick@Linder.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stacy Romick at (813) 759-1375
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Linder Industrial Machinery Company
2. The principal office address: 1601 S. Frontage Rd, Plant City, FL 33563
3. The mailing address (if different): _____
4. Date of incorporation/qualification: June 18, 1953 Document number: 174144
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)

Smith, Peggy H.

1601 S. Frontage Rd

Plant City, FL 33563

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

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.

Peggy H. Smith
Signature of an officer or director

Peggy H. Smith, CFO

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.

Corporation Service Company

By: Amanda Robinson
Signature of Registered Agent

2/14/2020

Date

If signing on behalf of an entity:

Amanda Robinson, 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 (04/13)

2020 MAY 13 AM 9:20