Division of Corporations

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:	Division of Corporations Fax Number : (850)617-6380	AHASSEE, FI	
· From:	Account Name : C T CORFORATION SYSTEM Account Number : FCA00000023	STATE LORIDA) 5

: (850)222-1092

: (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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COVER LETTER

Amendment Section

Division of Cor	porations		
SUBJECT:	VAUGHAN PRINTERS (1	NCORPORATED	
DOING L	Name of Co	rporation	
DOCUMENT NUMBE	R:	247731	
The enclosed Statement	of Change of Registered Office	Agent and fee are submitted for filing,	
Please return all corresp	ondence concerning this matter	to the following:	
	Linda J. 4	Anutin	
	Name of Con		
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***************************************	Firm/Company		
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	One Canterbury Green		
	Addre	288	
	· Stamford, C	Г 06901	
	City/State and	•	
	linda.auatin@ce	Irveo com	
E-ma	-	ure annual report notification)	
For further information of	oncerning this matter, please ca	11:	
		.,	
Name of (Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 chec	k made payable to the Departm	ent of State.	
<u>N</u>	Initing Address:	Street Address:	
	mendment Section	Amendment Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
	allahussaa FI 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

CR2E045 (8/05)

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

statement of c	e provisions of sections (nange is submitted for a d fer to change its register	corporation organi	ted under the laws of t	he State ofFL	,	_	
	the corporation: VAUG			ne State of Flor	id a .		
	the corporation: l office address; ONE C			eet, stamfoi	RD CT 0690	1	
3. The mailing	address (if different):						
4. Date of inco	poration/qualification: _	05/22/1961	Document number	r;	247731		
5. The name an Florida Depa	d street address of the curtiment of State: (If resig	rrent registered age	ant and registered office		ACCE AND AND ADDRESS OF THE PARTY OF THE PAR	9 DEC	"ন
	CORPORATION SERV	VICE COMPANY			ASS.	9	į,
	1201 HAYS STREET					A	F
	TALLAHASSEE FL 32	301-2525			· FISTA	<u> </u>	
(if changed):	d street address of the ne C T Corporation System c/o C T Corporation Sys						
		P.O. Box NOT a	eceptable				
	Plantation, Plorida 3332	4					
The street address changed will	ss of its registered office be identical.	e and the street ad	dress of the business	office of its reg	sistered ago	nt,	
Such change we authorized by t	s euthorized by resolut to board, or the corpora	ion duly adopted b tion has been notif	y its board of directoried in writing of the o	rs or by an offi hange.	COT SO		
\mathcal{U}	1001			Patti, Secretary			
-11	the appointment as reg to comply with the provi a I am familiar with an as filed merely to reflect been notified in writing	istered agent and c sions of all statute d accept the obliga to change in the r		ed name and tale pacity, er and complet a registered ago 288, I hereby co	e performa ent. Or, if t infirm that t	nce his the	
By: Ref. T.	Comportation System Comportation System Autors of Registered Agent	<u>t</u>	nalale	G	<u> </u>	-	
If signing on bell Protection	Parth - ASST.	Secrotary					
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FL006 - 07/23/2009 C T System Online

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