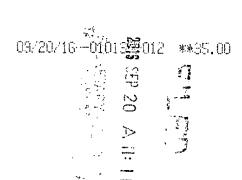
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BEAVER STREET TOWER COMPANY

551792

() Nonprofit	•	
() Foreign	() Amendment	() Merger
() Limited Partnership	() Dissolution/Withdrawal	() Mark
() LLC	() Reinstatement	
	() Annual Report	(X) Other
	() Name Registration	COA
() Certified Copy	() Fictitious Name	() UCC
		() CUS
(x) Walk In	() Photocopies	
() Mail Out		() After 4:30
	() Call If Problem	(x) Pick Up
Name	() Will Wait	<u> </u>
Availability		
Document	9/20/2016	Order#:
Examiner		10161056
Updater	KM	
Verifier		Ref#:
W.P. Verifier		
		Amount: \$

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Examiner		10161056	
Updater	KM		
Verifier		Ref#:	
W.P. Verifier			
		Amount: \$	
			

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

statement of cl	e provisions of sections 60 iange is submitted for a cu ler to change its registered	rporation organized unde	er the laws of the State	e of Florida	
	the corporation: BBAVER	•		oj rioma.	
	il office address:				
3. The mailing	address (if different):				
4. Date of inco	rporation/qualification:	1/22/1977 Do	cument number: 5517	192	
	nd street address of the cur artment of State; (If resign		registered office on fi	le with the	
	CORPORATE CREATI	ONS NETWORK INC			
	11380 PROSPERITY FA	RMS ROAD #221E			
	PALM BEACH GARDE	NS, FL 33410			
6. The name ar (if changed)	ad street address of the new	v registered agent (if chan	iged) and for registere	d office	
	c/o C T Corporation Syste	em, 1200 South Pine Island	Ronti	14 13	ž
		P.O. Box NOT occuptable		- 1	y.
	Plantation, Florida 33324	 		_	
The street addr	ess of its registered office be identical.	e and the street address of	f the business office o	of its registered agent	t, '
Such change w authorized by t	as authorized by resolution he board, or the corporati	on duly adopted by its bor on has been notified in w	ard of directors or by writing of the change.	an officer so	
			PAUL R. HITCHCOCK	κ ,	
-	icot in other ordicetor the appointment as regis to comply with the provis my duites, and I am fami is document is being filed that the corporation has		CORPORATE SECRETAR act in this capacity, ve to the proper and obligation of my posi ge in the registered of this change.		
By: CT Cor	poration System	9/15/201			
1	foire of Regulatived Agent	Alfred	Younan		
Paul	chaif of an entity:		Secretary		

* * * KILING 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)