To: Page 2 of 4 11/10/2017	2017-11-10 13:46:07-CST Division of Corporations Florida Department of Sta Division of Corporations Electronic Eiling Cover Sheet	
Note	e: Please print this page and use it as a cover sheet. T (shown below) on the top and bottom of all pages of	
	(((H170002975693)))	
Not	H170002975693ABCD	ar browser from this page.
	Doing so will generate another cover sl To: Division of Corporations Fax Number : (850)617-6380 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (512)418-6949 Fax Number : (954)208-0845	
	Enter the email address for this business entity t Enter the email address for this business entity t Email Address:	ddress please.** S TALLENT NOV 1 4 2017
EL 40N 71	REGISTERED AGENT CHAN STOEVER,GLASS & CO., IN Certificate of Status Certified Copy Page Count Estimated Charge	

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Electronic Filing Menu Corporate Filing Menu

Help

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

STOEVER, GLASS & CO., INC SUBJECT:

Name of Corporation

844544 DOCUMENT NUMBER:

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:

**CT** Corporation

Name of Contact Person

Firm/Company

Address

City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Contact Person Area Code & Daytime Telephone Number

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

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

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To:	Page 4 of 4	201	7-11-10 13.46 07 CST	1954208	0845 Fr		
	STATEM	IENT OF CHANGE OF RE BOTH	GISTERED OFFICE OR I FOR CORPORATIONS	REGISTERED AGE	NT OR		
	statement of ch	provisions of sections 607.05 ange is submitted for a corpor er to change its registered offl	ation organized under the la	ws of the State of <u>New</u>	York		
	1. The name of	the corporation: STOEVER, GI	.ASS & CO., INC.				
	2. The principa						
	3. The mailing	address (if different):					
	4. Date of incorporation/qualification: 11/07/1979 Document number: 844544						
		<ol><li>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)</li></ol>					
		U.S. CORPORATION COMP	ANY		te taŭ en esta Traj		
		1201 HAYES ST. STE. 105	· · · · · · · · · · · · · · · · · · ·		や 王 な 王 な		
		TALLAHASSEE, FL 32301			SST.		
	6. The name an (if changed):	d street address of the new reg	istered agent (if changed) and	d /or registered office	មុំ នំដែនរំ ភូនីស្រុកអារី ភូនីស្រុកអារី		
		C T Corporation System			19. ' '#		
		c/o C T Corporation System, 1	200 South Pine Island Road				
		Plantation, Florida 33324	P.O. Box NOT acceptable				
	The street addi as changed wil	ess of its registered office and be identical.	the street address of the bu	siness office of its regi	istered a		
	Such change w authorized by 1	as authorized by resolution due to board, or the corporation h	ily adopted by its board of d as been notified in writing o	lirectors or by an office of the change.	er so		
	Shotan	~	Sierra Burris-VP	3			
	I hereby acce I further agree performance o agent. Or, if th hereby confirn	ure of an officer or director t the appointment as registered to comply with the provision f my duties, and I am familiar tis document is being filed me that the corporation has bee tporation System		ed or typed name and title this capacity, le proper and complete ion of my position as ru he registered office add change.	e egistere fress, I		
	By an 20	rporation System	11/10/17				

42080845 From: Ranae McGraw

17 NOV 13 PH 8: 20

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177  $\Box$ 

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By: apr JUN

Signature of Registered Agent

If signing on behalf of an entity:

April Wittenwyler-Asst. Secretary

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)

Date