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Division of Co Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H140002546083)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (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.

Email Address:

REGISTERED AGENT CHANGE HARRIS-MCBURNEY COMPANY

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

13/14

https://efile.sunbiz.org/scripts/efilcovr.exe

10/31/2014

COVER LETTER

Division	of Corporations	
SUBJECT:	HARRIS-MCBURNEY COMPANY	
2020201	Name of C	orporation
DOCUMENT N	UMBER:	
The enclosed Sta	tement of Change of Registered Offic	e/Agent and fee are submitted for filing.
Please return all	correspondence concerning this matte	r to the following:
	T an y I	Mosts
	Name of Co	ntact Person
	HARRIS-MCBURNEY COMPANY	
	Firm/Co	ompany
	2120 N US Highway 301	
	Add	ress
	Tampa, FL - 33619-2654	
	City/State ar	nd Zip Code
	tmonts@hmcb.com	
	E-mail address: (to be used for f	uture annual report notification)
For further inform	nation concerning this matter, please	call:
Terry Moals		813 626-7171 at ()
N	ame of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35	.00 check made payable to the Depart	ament of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT ON OCT 31 AM 9: 46

statement of cha	provisions of sections 607.0502, 617.0502, 6 inge is submitted for a corporation organized r to change its registered office or registered	under the laws of the State of	_
	the corporation: HARRIS-MCBURNEY COMI	-	,
	office address: 2120 US HWY 301 N TAMPA		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 02/04/1980	_ Document number: 845147	
5. The name and	i street address of the current registered agent tment of State: (If resigned, enter resigned)		
•	CORPORATION SERVICE COMPANY		
	1201 HAYS STREET TALLAHASSEE, FL 32	301-2525	14 OCT
The name and (if changed):	street address of the new registered agent (if	changed) and for registered office	131 AM 9: 46
	c/o C T Corporation System, 1200 South Pine I.		က် နို
	P.O. Box NOT accept Plantation, Florida 33324	NADICE	
as changed will Such change wa authorized by th	ess of its registered office and the street address of its registered office and the street address of its identical. Is authorized by resolution duly adopted by its board, or the corporation has been notified to an other or director.		gent,
	the appointment as registered agent and agio comply with the provisions of all statutes my duties, and I am familiar with and accept a duties, either the same that the corporation has been notified in writering System	ree to act in this capacity. relative to the proper and complete t the obligation of my position as registered change in the registered office address, I tting of this change.	i
Ву:	Dayle Bry 10.	/09/2014 Date	_
-	nalf of an entity:	er soor	
Danijela Byers	•		
Ту	ped or Printed Name	34 00 + + +	

* * * 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)