## 851447

| (Requestor's Name)                      |                   |           |  |  |  |
|---|-------------------|-----------|--|--|--|
| (Address)                               |                   |           |  |  |  |
| (Address)                               |                   |           |  |  |  |
| (Cit                                    | y/State/Zip/Phone | #)        |  |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL      |  |  |  |
| (Business Entity Name)                  |                   |           |  |  |  |
| (Document Number)                       |                   |           |  |  |  |
| Certified Copies                        | _ Certificates    | of Status |  |  |  |
| Special Instructions to Filing Officer: |                   |           |  |  |  |
|   |                   |           |  |  |  |
|   |                   |           |  |  |  |
|   |                   |           |  |  |  |

Office Use Only



500215739315

01/03/12--01019--020 \*\*35.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 INN -3 PM 12: L2

RARACHS

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

| SUBJECT: L.G. BARCUS AND SONS, INC.  Name of Corporation   |   |                                     |  |  |  |  |
|--|---|-------------------------------------|--|--|--|--|
| DOCUMENT NUMBER:   | NUMBER: 851447                          |                                     |  |  |  |  |
| 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:  |   |                                     |  |  |  |  |
| The second secon |   |                                     |  |  |  |  |
| Janice Null  |   |                                     |  |  |  |  |
|  | Name of Contact Person                  |                                     |  |  |  |  |
|  |   |                                     |  |  |  |  |
| InCorp Services, Inc.  |   |                                     |  |  |  |  |
|  | Firm/Company                            |                                     |  |  |  |  |
|  |   |                                     |  |  |  |  |
| 2360 Corporate Circle, Suite 400   |   |                                     |  |  |  |  |
|  | Address                                 |                                     |  |  |  |  |
|  | II I NV 0007                            | 4 7700                              |  |  |  |  |
| Henderson, NV 89074-7722 City/State and Zip Code   |   |                                     |  |  |  |  |
|  |   |                                     |  |  |  |  |
|  | tom.roberts@barcus.                     |                                     |  |  |  |  |
| E-mail address: (to be used for future annual report notification)   |   |                                     |  |  |  |  |
|  |   |                                     |  |  |  |  |
| For further information con  | cerning this matter, please call:       |                                     |  |  |  |  |
| Janice Null on behalf of Incorp Services, Inc.  Name of Contact Person  Area Code & Daytime Telephone Number   |   |                                     |  |  |  |  |
| Name of Co   | ntact Person A                          | rea Code & Daytime Telephone Number |  |  |  |  |
| •  |   |                                     |  |  |  |  |
| Enclosed is a \$35.00 check made payable to the Department of State.   |   |                                     |  |  |  |  |
|  |   |                                     |  |  |  |  |
| Ma   | niling Address:                         | Street Address: Amendment Section   |  |  |  |  |
|  | nendment Section vision of Corporations | Division of Corporations            |  |  |  |  |
|  | D. Box 6327                             | Clifton Building                    |  |  |  |  |
|  | Hahassee, FL 32314                      | 2661 Executive Center Circle        |  |  |  |  |

Tallahassee, FL 32301

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

| Pursuant to the provisions of sections 6 statement of change is submitted for a c in order to change its register   | corporation organized                          | d under the laws of the State (                            | of Kansas                |
|---|--|--|--------------------------|
| 1. The name of the corporation: L.G.  | BARCUS AND                                     | SONS, INC.   |                          |
| 2. The principal office address: 1430 S   | STATE AVENUE                                   | , KANSAS CITY, KS 66                                       | 3102                     |
| 3. The mailing address (if different):  |  |  |                          |
| 4. Date of incorporation/qualification: _   | 12/31/1981                                     | Document number:   | 851447                   |
| 5. The name and street address of the cu<br>Florida Department of State: (If resig  |  | t and registered office on file                            | with the                 |
| CT CORPORATION  | ON SYSTEM                                      |  |                          |
| 1200 S PINE ISLAND RD   |  | SECTIVISION J  |                          |
| PLANTATION FL 33324 US  |  | AN -   |                          |
| 6. The name and street address of the ne (if changed):  |  | f changed) and /or registered                              | JAN -3 PH 12: 42         |
| Incorp Services, I  | nc.  |  | <b>5</b>                 |
| 17888 67th Court  | North P.O. Box NOT acc                         |  | <u></u>                  |
| Loxahatchee, FL   |  | eptable  |                          |
| The street address of its registered offi   | ice and the street add                         | lress of the business office of                            | of its registered agent, |
| Such change was authorized by resolu authorized by the board, or the corporation  | ition duly adopted by<br>ation has been notifi | vits board of directors or by ed in writing of the change. | an officer so            |
| Thomas A Reference Signature of an officer or director  | 1  | Thomas J. Roberts,   |                          |
| I hereby accept the appointment as reg<br>I further agree to comply with the pro<br>of my duties, and I am familiar with an<br>document is being filed merely to refle<br>corporation has been notified in writin | vistered agent and a                           | aree to act in this canacity                               |                          |
| Signature of Registered Agent   | <u> </u>                                       | 12/28/11<br>Date   |                          |
| It signing on behalf of an entity:  |  |  |                          |
| Janice Null on behalf of Incorp   | Services, Inc.                                 |  |                          |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

\* \* \* FILING FEE: \$35.00 \* \* \*