## 857209

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Hussey Seating Company
(Name of corporation)
DOCUMENT NUMBER: 857209
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 state of the s
Suzanne Cryan
(Name of person)
Bay State Corporate Service, Inc.
(Name of firm/company)
Six Beacon Street, Ste. 510
(Address)
Boston, MA 02108
(City/state and zip code)
For further information concerning this matter, please call:
Suzanne Cryan at ( 617 ) 742-8484
Suzanne Cryan  (Name of person)  at (617 ) 742-8484  (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street
P.O. Box 6327 409 E. Gaines Street Tellahassee El 32314

CR2E045(09/03)

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

change is submi	provisions of sections 607.0 itted for a corporation organ gistered office or registered	nized under the laws of t	he State of Mai		s, this st		it of order
	the corporation: Hussey Se	_					
	office address: 38 Dyer St		ck, ME 03906				
3. The mailing a	address (if different):						
4. Date of incor	poration/qualification: 7/26/	783 Doc	ument number: _8	357209			
	i street address of the curren rtment of State:	t registered agent and re	egistered office or	n file with the			
	CT Corporation System			. <u> </u>			
	1200 S. Pine Island Road	1	· <del>-</del>	, 			
	Plantation, FL 33324				SCC	96	
6. The name and (if changed):	i street address of the new re	egistered agent (if chang	ed) and /or regist	ered office	AHASSE	06 JAN 30	
	NRAI Services, Inc.				T = 1	PH	
	2731 Executive Park I	Orive, Suite 4			STAT COR	7:2	
	(P.O. Weston, FL 33331	Box or personal mailbox NOT	acceptable)		Dm -	<del></del>	4
The street addre	ess of its registered office a	nd the street address of	f the business off	ice of its regis	tered a	gent, a	S
Such change withe board, or th	as authorized by resolution e corporation has been noti	duly adopted by its bo fied in writing of the c	ard of directors of hange.	or by an office	r so aut	horize	d by
- Welley	Signature of an officer or director)		Stephen S. Kol	khorst, V.P. o		ice	
NRAI Services by:	the appointment as registe to comply with the provision familiar with and accept a change in the writing of this change.  (Signature of Registered Agent)  Shalf of an entity:	red agent and agree to ns of all statutes relati the obligation of my po e registered office add	act in this capa ve to the proper sition as register ress, I hereby con	city.  and complete red agent. Or, of the complete red agent. Or, of the complete red agent. Or, of the complete red agent. Or	perform if this corpore	iance ( docum ition h	of my ent is as
Suzanne Crya	V		Assistant Secre	tarv			
	(Typed or Printed Name)		=======================================	(Canacity)			

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