

F00000005671

(Requestor's Name)

(Address)

(Address)

(City/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



300337515763

12/06/19--01021--020 **35.00

19 DEC -6 PM 3:46

CLERK OF SUPERIOR COURT
DIVISION OF CORPORATIONS

JAN 13 2020
C McNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: READ JONES CHRISTOFFERSON LTD. (INCORPORATED)
Name of Corporation

DOCUMENT NUMBER: F00000005671

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:

B. Lord
Name of Contact Person

Harbor Compliance
Firm/Company

1830 Colonial Village Lane
Address

Lancaster, PA 17601
City/State and Zip Code

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

For further information concerning this matter, please call:

B. Lord at (717) 431-9157
Name of Contact Person Area Code & Daytime Telephone Number

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

Mailing Address:
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

19 DEC -6 PM 3:46
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of British Columbia in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: READ JONES CHRISTOFFERSON LTD. (INCORPORATED)
2. The principal office address: 1285 West Broadway, Suite 300 Vancouver, BC V6H 3X8
3. The mailing address (if different): 1816 Crowchild Trail NW, Suite 200 Calgary, AB T2M 3Y7
4. Date of incorporation/qualification: 10/11/2000 Document number: F00000005671
5. 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)
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agents Inc.

7901 4th St N STE 300

P.O. Box NOT acceptable

St. Petersburg FL 33702

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

Bruce Johnson

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

11/22/2019

Date

If signing on behalf of an entity:

Bill Havre/Secretary/Registered Agents Inc.

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)

19 DEC -6 PM 3:46
DIVISION OF CORPORATIONS
STATE OF FLORIDA