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DIVISION OF CORPORATIONS
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COVER LETTER

Division of Corporations		
SUBJECT: O'Brien & Gere Limited dba O'Brien & Gere Limited Inc. (Name of Corporation)		
DOCUMENT NUMBER: F01000000517		
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:		
Suzanne Cryan		
(Name of Contact Person)		
Bay State Corporate Services, Inc.		
(Firm/Company)		
6 Beacon Street, Suite 510		
(Address)		
Boston, MA 02108 (City/State and Zip Code)		
For further information concerning this matter, please call:		
g and manner, product cann		
Suzanne Cryan at (6 (Name of Contact Person) (A	17 742-8484	
(Name of Comact Terson) (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department 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	

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 New York in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: O'Brien & Gere Limited INC.
2. The principal office address: 5000 Brittonfield Parkway, East Syracuse, NY 13057
3. The mailing address (if different): PO Box 4873, Syracuse, NY 13221
4. Date of incorporation/qualification: 1/26/01 Document number: F0100000517
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CT Corporation System
1200 South Pine Island Road
1200 South Pine Island Road Plantation, FL 33324
CT 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): NRAI Services, Inc.
NRAI Services, Inc.
2731 Executive Park Drive, Suite 4
(P.O. Box NOT acceptable) Weston, FL 33331
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.
John F. Sutphen Executive Vice President (Signature of an office or director) (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.
Mane J Cupa 11 30 107 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Suzanne T. Cryan, Asst. Sec. (Typed or Printed Name)

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

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