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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: The Schreiber Company Name of Corporation	
DOCUMENT NUMBER: F01000001064	
The enclosed Statement of Change of Registered Office//	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	o the following:
Anthony V. Cortese	
Name of Contact Person	
Anthony V. Cortese Attorney At Law	
Firm/Company	
5027 West Laurel Street, Suite 213	
Address	
Tampa, FL 33607	
City/State and Zip Code	
E-mail address: (to be used for future annual report r	notification)
For further information concerning this matter, please cal	1:
Anthony V. Cortese	31 (813) 286-1557
Name of Contact Person	at (813) 286-1557 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departme	ent of State.
	reet Address: mendment Section

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cha	nge is submitted	ctions 607,0502, d for a corporatio	n organizea	under the laws o	of the State of	Pennsy		_
in order	r to change its r	egistered office o			n the State of I	Florida.		
1. The name of t	he corporation:	THE SCHREIB	ER COMPA	NY				
2. The principal	office address:_	609 Epsilon Dri	ve					
	·	Pittsburgh, PA	15238					_
3. The mailing ac	ddress (if differ	ent): (same)						_
4. Date of incorp	oration/qualific	ation: 2/23/01		Document num	ber: F01000	001064		_
5. The name and Florida Depart	street address of ment of State: (f the current regis If resigned, enter	stered agent resigned)	and registered or	ffice on file wi	ith the		
	Anthony \	/. Cortese					2(
-	1111 Nort	h Westshore Boo	ulevard, Sui	te 213)20 11).(<u>-</u> -
_	Tampa, F	_ 33607					ယ္	<u></u>
6. The name and (if changed):	street address o	f the new register	ed agent (if	changed) and /or	registered off	ice-	P# 3:	コー
_	Anthony V.	Cortese, Esquire) 				ვ5	
	5027 West	Laurel Street, Su	ite 213		-			
~	T		P.O. Box NOT	acceptable				
_	Tampa, FL 3	33607						
The street address as changed will b								,
Such change was authorized by the	authorized by board, or the c	resolution duly a orporation has be	dopted by it een notified	s board of direc in writing of the	tors or by an c change.	officer so)	
N	of an officer or direc			S. JAS S				ð
I hereby accept the I further agree to of my duties, and document is being corporation has be	ne appointment comply with th I am familiar w g filed merely to een notified in	as registered ag e provisions of a vith and accept th o reflect a change writing of this ch						
Signat	ure of Registered As	ent		3/_	20/2 (<u>) </u>		
If signing on beha	olf of an entity:							
	-	ا ص س						
Austrace Type	d 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 (04/13)