

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for further annual report mailings. Enter only one email address please.

Bmail Address:_

REGISTERED AGENT CHANGE POWERS FASTENERS, INC.

| Certificate of Status | 0 |
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| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

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Corporate Filing Menu

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| | 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 <u>New York</u> | · |
| | 1. The name of the corporation: Power Fasteners, Inc. | |
| | 2. The principal office address: ^{2 Powers Lane, Brewster NY 10509} | |
| • | 3. The mailing address (if different): | |
| | 4. Date of incorporation/qualification: 08/01/2001 Document number: P01000004071 | |
| | 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) | |
| | Michael Geffigen | • |
| | 9208 Palm River Road | |
| | Tampa, FL 33619 | |
| ••• » • | 6. The name and street address of the new registered agent (if changed) and /or registered office | FIL |
| · . | C T Corporation System | μ. Γ. |
| | c/o C T Corporation System, 1200 South Pine Island Road | 0 |
| | P.O. Box NOT acceptable | |
| | 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. | |
| | Kathryn P. Sherer Assistant Saretary | |
| | 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 dultes, and I am familiar with and accept the obligation of my position as registered agent. Of, if this accument is being filed merely to reflect a change in the registered office address, I peredy chains that the corporation has been notified in writing of this change. | |
| | By: A Signature of Registered Agent | |
| | If signing on behalf of an entity: Lauren H. Kreatz Special Assistant Type Secretary | |
| | * * * 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) | |
| 76406 - 10/25/2013 \ | Walters Kluwer Daline | |
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