## F0100000

(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:					
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FILED 07 AUG 27 AM 10: 52



11600 College Boulevard, Ste 210 Overland Park, KS 66210 800-550-6724 www.mrai.com

August 22, 2007

Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Ace Fabrication, Inc.

Florida Change of Agent

Dear Sir/Madam,

For the purposes of changing the registered agent and registered office of the above captioned Ace Fabrication, Inc. enclosed herewith, in duplicate, are a Statement of Change of Registered Office and/or Registered Agent accompanied by our check in the amount of Amount of Check.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed Business Reply Envelope.

Thank you in advance for your cooperation in this matter.

Very truly yours,

Lisa Reeves

Enclosure - Check

## **COVER LETTER**

Division of Corporations				
SUBJECT: Ace Fabrication, Inc. (Name of Corporation)				
DOCUMENT NUMBER: F01000004746				
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:				
Lisa Reeves				
(Name of Contact Person)				
National Registered Agents, Inc.				
(Firm/Company)				
11600 College Boulevard, Ste 210				
(Address)				
Overland Park, KS 66210 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Lisa Reeves at ( 913 ) 754-0637				
(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  Street Address:  Amendment Section				
Division of Corporations  Division of Corporations  Division of Corporations				
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle				
rananassee, fl 32314 2001 executive Center Circle				

## FILEC

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

statement of cha	provisions of sections 607.0502, 617.0502, 60 nge is submitted for a corporation organized r to change its registered office or registered	under the laws of the State of Alak		
1. The name of t	he corporation:	Ace Fabrication, Inc.		
	office address: 2715 Dauphin St, Mobile,	AL 36606		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 9/4/2001	Document number: F0100004	746	
5. The name and	street address of the current registered agent tment of State:			
	C T Corporation System			
	1200 South Pine Island Road		<b>07</b> 351	
	Plantation, FL 33324		07 AUG 27 SEURL IAR ALLAHASS	-
6. The name and (if changed):	street address of the new registered agent (if	changed) and /or registered office	AM OF	ר נ
	NRAI Services, Inc.		STAT LORI	
	2731 Executive Park Drive, Su	uite 4	DA 2	
	(P.O. Box NOT acceptable) Weston, FL 33331			
The street addre	ess of its registered office and the street add	ress of the business office of its registe	ered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted by board, or the corporation has been notifie	its board of directors or by an officered in writing of the change.	so	
(Signati	re of an officer or director) Cuart -	Robin C. Stewart Sec./Tr	res.	
I hereby accept I further agree to of my duties, an document is being corporation has LISA f	the appointment as registered agent and ag to comply with the provisions of all statutes d I am familiar with and accept the obligate ng filed merely to reflect a change in the re been notified in writing of this change. Reeves, Assistant Secretary	ree to act in this capacity. relative to the proper and complete p ion of my position as registered agent. gistered office address, I hereby confi	erformance Or, if this rm that the	٠
(1)	mature of Registered Agent)	8/20/07 (Date)	<del></del>	
If signing on be	half of an entity:			
DRAIS	yped or Printed Name)			

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