

F010000006314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

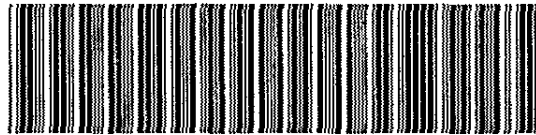
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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RA
Change

12/15/06--01055--019 **35.00

FILED
2006 DEC 15 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AR
12/19/06

PARANET CORPORATION SERVICES, INC.

3761 Venture Drive Suite 260
Duluth, Georgia 30096
800-277-9977 / Fax 800-815-0477

December 8, 2006

FILING TRANSMITTAL LETTER

Florida Department of State
Corporations Division
2661 Executive Center Circle West
Tallahassee, FL 32301

Phone: 850-488-9000

RE: ~~Glock, Inc.~~

- Glock Professional, Inc.

Dear Filing Officer:

Please find the enclosed:

1. Two (2) copies of change of Registered Agent/Office for the above entity;
2. Our check in the amount of \$35.00 to cover the filing fee; and
3. Self-addressed envelope for return of evidence.

If you have any questions, or require anything further, please contact me toll free at 1-800-277-9977. Thank you for your assistance.

Very truly yours,

Stephanie Thomas

Paranet Job No.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Glock, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F01000006314

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:

Stephanie Thomas
(Name of Contact Person)

Paranet Corporation Services, Inc.
(Firm/Company)

3761 Venture Drive, Suite 260
(Address)

Duluth, GA 30096
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie Thomas at (800) 277-9977
(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

**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 Georgia in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Glock, Inc.
2. The principal office address: 6000 Highlands Pkwy., Smyrna, GA 30082
3. The mailing address (if different): n/a
4. Date of incorporation/qualification: 12/11/01 Document number: F010000063
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 Rd.
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.
2731 Executive Park Drive, Suite 4
(P.O. Box NOT acceptable)
Weston, FL 33331

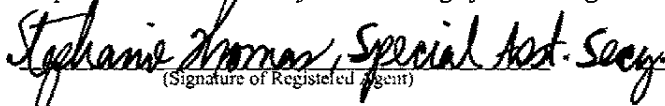
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


(Signature of an officer or director)

Carlos Guevara, Secretary
(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)

12/5/06
(Date)

If signing on behalf of an entity:

Stephanie Thomas, Special Asst. Secy.
(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 (8/05)

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TALLAHASSEE, FL
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