

FO 1958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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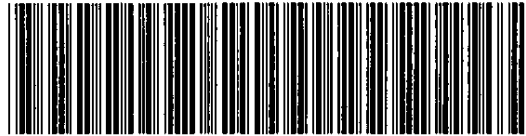
(Business Entity Name)

(Document Number)

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15 MAY 21 PM 3:26  
S. J. WHITE  
TALLAHASSEE, FLORIDA

R/A Chg

MAY 27 2015

R. WHITE



May 20, 2015

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: North Florida Lumber, Inc., Document No.: F01958

To Whom It May Concern:

For the above referenced corporation, enclosed please find the following:

- 1) Cover Letter and Statement of Change of Registered Office or Registered Agent or both for Corporation
- 2) Check No.: 105795 in the amount of \$35.00

Please process the above referenced forms to change the registered agent.

If you have any questions, please call me directly at 850-372-6151. Thank you.

Sincerely,

Stacy L. Walters, FRP  
Paralegal to General Counsel

Graceville  
850.263.2056

Bristol  
850.643.2238

Brookhaven  
601.833.1990

Corporate  
850.263.4457

/slw

Enclosures (as stated)

Post Office Box 7  
Graceville, Florida 32440

REX-LUMBER.COM

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** North Florida Lumber, Inc.

Name of Corporation

**DOCUMENT NUMBER:** F01958

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:

Frank E. Bondurant, Esq.

Name of Contact Person

Firm/Company

P. O. Box 7

Address

Graceville, FL 32440

City/State and Zip Code

fbondurant@rex-lumber.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank E. Bondurant, Esq.

Name of Contact Person

at ( 850 ) 372-6150

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

1. The name of the corporation: North Florida Lumber, Inc.
2. The principal office address: 1820 Highway 2 East, Graceville, FL 32440
3. The mailing address (if different): 1820 Highway 2 East, P.O. Box 7, Graceville, FL 32440
4. Date of incorporation/qualification: 10/16/1980 Document number: F01958
5. 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)

C. Finley McRae

1820 HWY 2 East

Graceville, FL 32440

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Frank E. Bondurant, Esq.

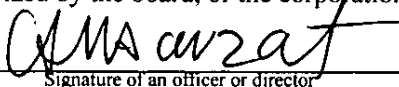
1820 Highway 2 East

P.O. Box NOT acceptable

Graceville, FL 32440

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.

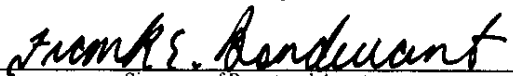


Signature of an officer or director

Caroline M. Dauzat

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

March 30, 2015

Date

If signing on behalf of an entity:

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 (03/12)

FILED  
15 MAY 21 PM 3:24  
TALLAHASSEE, FLORIDA