

FD2000001317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

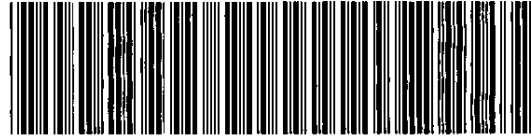
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JUL 15 PM 3:59  
11:00

*C. A. Charge*  
C. COULLETTE

JUL 15 2010

EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Nor-Lake, Incorporated  
Name of Corporation

**DOCUMENT NUMBER:** F02000001317

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 Granskie for InCorp Services, Inc.  
Name of Contact Person

InCorp Services, Inc.  
Firm/Company

375 N. Stephanie Street · Suite 1411  
Address

Henderson, NV 89014-8909  
City/State and Zip Code

lisa.granskie@incorp.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Granskie at (800) 246-2677  
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 Wisconsin in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Nor-Lake, Incorporated
2. The principal office address: 11 Keewaydin Drive, Suite 300  
Salem, NH 03079
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/12/2002 Document number: F02000001317

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)

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
Tallahassee, FL 32301

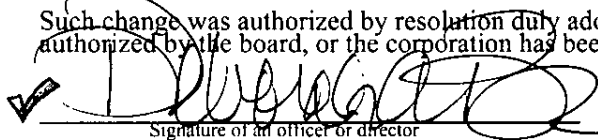
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

InCorp Services, Inc.  
17888 67th Court North  
P.O. Box NOT acceptable  
Loxahatchee, FL 33470

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JUL 15 AM 3:59  
FILED

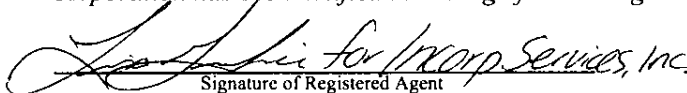
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.



Deborah A. Rosen, Vice President  
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

July 2, 2010  
Date

If signing on behalf of an entity:

Lisa Granskie on behalf of InCorp Services, Inc.  
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