## £0200002085

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ACCOUNT NO. : I2000000195

REFERENCE : 508875 7641330

AUTHORIZATION :

COST LIMIT

ORDER DATE: January 25, 2013

ORDER TIME : 2:58 PM

ORDER NO. : 508875-006

CUSTOMER NO: 7641330

CHANGE OF AGENT

NAME: DOPPELMAYR USA, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

statement of cha	inge is submitted for a corporation or	0302, 607.1308, or 617.1308, Florida Statutes, this ganized under the laws of the State of Utah gistered agent, or both, in the State of Florida.
	the corporation: Doppelmayr USA	
2. The principal	office address: 3160 W 500 S, Sa	ult Lake City, UT 84104
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 4/25/2002	Document number: F0200002085
	street address of the current registere tment of State: (If resigned, enter resi	ed agent and registered office on file with the gned)
	C T Corporation System	\$ \$\frac{1}{2} \times C_1
	1200 South Pine Island Road	13 JA
	Plantation, FL 33324	<b>₹</b>
1200 South Pine Island Road  Plantation, FL 33324  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Corporation Service Company		
	Corporation Service Company	, 37
	1201 Hays Street	
	P.O. Box 1 Tallahassee, FL 32301	NOT acceptable
The street addre	ss of its registered office and the stre be identical.	eet address of the business office of its registered agent,
Such change wa authorized by th	s authorized by resolution duly adop e board, or the corporation has been	ted by its board of directors or by an officer so notified in writing of the change.
_ Sur	leves	Deb Reeves, Vice President
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm,	mv duites, and I am familiar with an	Printed or typed name and title  and agree to act in this capacity.  attutes relative to the proper and complete d accept the obligation of my position as registered eflect a change in the registered office address, I d in writing of this change.
By:	on service company	1/25/2013
Sign	nature of Registered Agent	Date
If signing on bel	half of an entity:	
Dona L Prieb	e, Asst VP	
Ty	ped or Printed Name	

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