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To:

Division of Corporations

Fax Number

: (950)617-6380

Phon:

Account Name : CORPORATION SERVICE COMPANY

Account Number: T20000000195 Phone: (850)521-0821 Fax Number: (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE FGM GULF COAST, INC.

Certificate of Status	Ü
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Electronic Filing Menu

Corporate Filing Menu

Help

TO:

Amendment Section Division of Corporations

COVER LETTER

A A TALL MAY STAND A DECEMBER OF LABOUR

SUBJECT: FGM Gulf Coast, Inc. (Name of Corporation)
DOCUMENT NUMBER: F02000004131
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:
Kelli A. Miles, Paralegal (Name of Contact Person)
Holland & Knight (Firm/Company)
1600 Tysons Blvd. Suite 700 (Address)
Tysons Corner, VA 22102 (City/State and Zip Code)
For further information concerning this matter, please call:
Kelli A. Miles at (703) 720-8096 (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

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850-617-6381

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July 18, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FGM GULF COAST, INC. 12021 SUNSET HILLS ROAD SUITE 400 RESTON, VA 20121

SUBJECT: FGM GULF COAST, INC.

REF: F02000004131

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form submitted is the wrong form. Please use the registered agent form for a corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Teresa Brown Regulatory Specialist II FAX Aud. #: E12000185182 Letter Number: 212A00019118



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

suant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ement of change is submitted for a corporation organized under the laws of the State of <u>Virginia</u> in order to change its registered office or registered agent, or both, in the State of Florida.	
he name of the corporation: FGM Gulf Coast, Inc.	
he principal office address: 12021 Sunset Hills Road, Suite 400; Reston, VA 20141	
he mailing address (if different):	
Date of incorporation/qualification: August 14, 2002 Document number: F02000004131	
The name and street address of the current registered agent and registered office on file with the lorida Department of State:	
Scott Hendrickson	
3530 Crowfut Court	7
Bonits Springs, FL 34134	Ç
The name and street address of the new registered agent (if changed) and /or registered office if changed):	
Corporation Service Company	==
1201 Hays Street (P.O. Box NOT acceptable)	
Tallahassee, FL 32301	
e street address of its registered office and the street address of the business office of its registered agent changed will be identical.	,
the change was authorized by resolution duly adopted by its board of directors or by an officer so horized by the board, or the corporation has been notified in writing of the change.	
Scott Gessay, President (Signature of an of New or) Scott Gessay, President (Printed or typed name and use)	
creby accept the appointment as registered agent and agree to act in this capacity, or their agree to comply with the provisions of all statutes relative to the proper and complete performance by duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if the cument is being filed merely to reflect a change in the registered office address. I hereby confirm that the poration has been notified in writing of this change. Company	2
Signature of Registered Agent) (Date)	
igning on behalf of an entity. Caring L. Dursian	
Asat. Vice President	
(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)