F0200000450

(Re	questor's Name)	
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(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	40
CIL	y/State/Zip/Prione	s #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
	_	
Special Instructions to	Filing Officer:	
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Office Use Only



800266820078

11/25/14--01011--014 **35.00

DEC - 5 2014 T. CARTER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: November 20, 2014

Order#: 386321-003

Re: E. H. GLOVER INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of ch	ange is submitted for a cor	,0502, 617.0502, 607.1508, or t poration organized under the la office or registered agent, or bo	nvs of the State of	Virginia		
•	the corporation: E.H. GLC		, , , , , , , , , , , , , , , , , ,			
2. The principal	office address: 293 John	s Neck Road, Weems, VA 225	76.			
3. The mailing	address (if different): PO	Box 1240, VA 22578				
4. Date of incor	prporation/qualification: 09/03/2002 Document number: F02000004501					
5. The name an		ent registered agent and register				
	Corpdirect Agents, Inc.			_		
	1200 South Pine Island	Road				
	Plantation	FL	33324	•		
6. The name an (if changed):		registered agent (if changed) ar	nd /or registered o	ffice	TALI	
	Corporation Service Cor	mpany		14 NOV	L'AH)	
	1201 Hays Street			25	ARY ASSE	
	Tallahassee	PD Box NOT acceptable	32301	PH	<u> </u>	
The street addr	ess of its registered office be identical.	and the street address of the bi	usiness office of i	မှ s registered æmt.	STATE LORIDA	
Such change wanthorized by t	as authorized by resolution he board, or the corporation	n duly adopted by its board of on has been notified in writing	directors or by an of the change.	officer so		
Sther	Doner	Esther Glover		Secretary/ Trea	sur	
I further agree performance of agent. Or, if th hereby confirm	to comply with the provision of the provision of the familiary factorial in the familiary factorial in the factorial factorial in the factoria	tered agent and agree to act in ions of all statutes relative to il liar with and accept the obligat merely to reflect a change in the been notified in writing of this i	ie proper and con Ion of my position he registered office	npleté n as registered		
By: Sexue	anature of Recipiered Avenu.	11/20/2014	Date	····		
If signing on be	chalf of an entity:		V			
Sylvia Queppe	et, Assistant Vice Presider	nt _. .				
Т	yped or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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