F3000000253

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:	٦
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SECRETARY OF STATE

R.A. Charge

C.COULLIETTE

OCT 1.7 2011

EXAMINER



October 10, 2011

Florida Department of State Division of Corporations P.O. Box 6327 Tailahassee, FL 32314

RE: Architectural Integrated Metals, Incorporated

Dear Filing Officer:

Please file the attached Change of Agent for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,

Denise Bell

Senior Corporate Specialist

Encl.

COVER LETTER

TO:		ment Section n of Corporations			
SUBJ	ECT:	Architectu	ral Integrated Name of C	Metals, Incorporation	ted
DOC	UMENT I	NUMBER:	F030	000000253	
The e	nclosed St	atement of Change	of Registered Office	e/Agent and fee are subr	nitted for filing.
Please	e return all	correspondence co	oncerning this matter	to the following:	
		<u> </u>	Denis		
			Name of Cor	ntact Person	
			NRAI Corpor	ate Services	
			Firm/Co		
		1	6055 Space Cent	ter Blvd., Ste. 235	
		••	Addi	1033	
			Houston, 1	X 77062	
			Houston, 7 City/State an	d Zip Code	
		E-mail addres	<u>@ai -metals.</u> s: (to be used for fi	com uture annual report no	tification)
For fu	irther infor	rmation concerning	this matter, please c	all:	
		Denise Bel	<u>- </u>	at (800)	862-5438
	1	Name of Contact P	erson	Area Code & Day	time Telephone Number
Enclo	sed is a \$3	5.00 check made p	ayable to the Depart	ment of State.	
		Division P.O. Box	ddress: ent Section of Corporations 6327 ee, FL 32314	Street Address Amendment Division of C Clifton Build 2661 Execut	Section Corporations

Tallahassee, FL 32301

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

statement of chai	provisions of sections 607.0502, 617.0502, 607.1508, nge is submitted for a corporation organized under th r to change its registered office or registered agent, or	e laws of the State o	of Alabama	_	
	he corporation: Architectural Integrated M		•		
	office address: 1724 Northside Industrial Blvd,				
3. The mailing a	ddress (if different);				
4. Date of incorp	oration/qualification: 01/16/2003 Docum	ent number:	F030000002	53	_
	street address of the current registered agent and registerent of State: (If resigned, enter resigned)	stered office on file	with the		
	C T CORPORATION SYSTEM		<u></u>	* 4	
	1200 SOUTH PINE ISLAND ROAD				: : (1) : (1)
	PLANTATION FL 33324 US			ISIUN OF O	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered (office		AT TORPORATION
	NRAI Services, Inc.			8: 46	98 A.I
	515 East Park Avenue			5	1
	P.O. Box NOT acceptable Tallahassee, FL 32301				
The street address as changed will	ss of its registered office and the street address of the identical.	e business office o	f its registered ag	gent,	
Such change wa authorized by th	s authorized by resolution duly adopted by its board e board, or the corporation has been notified in writ	l of directors or by ing of the change.	an officer so		
	e of an officer or director	Stuart E. Webl	nd title		
I hereby accept if I further agree to of my duties, and document is bein corporation has NRAI Service	the appointment as registered agent and agree to ac o comply with the provisions of all statutes relative of I am familiar with and accept the obligation of my ng filed merely to reflect a change in the registered been notified in writing of this change. is, Inc.	et in this capacity, to the proper and c position as registe office address, I he	complete perform cred agent. Or, ij reby confirm that	ance f this t the	
by: Sign	Quiso BOM ature of Registered Agent) - /-/ Date	1		
If signing on bel	nalf of an entity:				
	se Bell, Asst. Secy.				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Architectural Integrated Metal Name of Corporat	s, Incorporated
DOCUMENT NUMBER: F030000	00253
The enclosed Statement of Change of Registered Office/Agen	t and fee are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Denise Bell	
Name of Contact Pe	erson
NIDAL Compande Se	- m . t
NRAI Corporate Se	
• •	
16055 Space Center Blv	vd., Ste. 235
Address	
Houston, TX 77 City/State and Zip (062 Code
magniel@ai-metals.com E-mail address: (to be used for future a	navel conort notification
E-man address. (to be used for future a	imaai report notification)
For further information concerning this matter, please call:	
Denise Bell at (800 \ 862-5438
Name of Contact Person	800) 862-5438 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of	f 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

statement of chan	provisions of sections 607.0502, 617.0502, 607.1508, or 61 nge is submitted for a corporation organized under the law r to change its registered office or registered agent, or both	vs of the State of Alabama	
1. The name of th	he corporation: Architectural Integrated Meta	ls, Incorporated	
2. The principal o	office address: 1724 Northside Industrial Blvd, Co	lumbus, GA 31904	
3. The mailing ad	ddress (if different):		
4. Date of incorpo	poration/qualification: 01/16/2003 Document n	number: F0300000253	
	street address of the current registered agent and registered tment of State: (If resigned, enter resigned)	d office on file with the	
	C T CORPORATION SYSTEM		
_	1200 SOUTH PINE ISLAND ROAD		
_	PLANTATION FL 33324 US		
6. The name and s (if changed):	street address of the new registered agent (if changed) and	l /or registered office	SINCISIAN.
	NRAI Services, Inc.		OF CORPOR
-	515 East Park Avenue		200
	P.O. Box: NOT acceptable Tallahassee, FL 32301	e,)%[A]
as changed will b	ss of its registered office and the street address of the bube identical.		<u> </u>
Such change was authorized by the	s authorized by resolution duly adopted by its board of a board, or the corporation has been notified in writing a	directors or by an officer so f the change.	
Signature	e of an officer or director Print	uart E. Webb, Pres	
hv:	the appointment as registered agent and agree to act in o comply with the provisions of all statutes relative to the dI am familiar with and accept the obligation of my posing filed merely to reflect a change in the registered office been notified in writing of this change. 18. Inc. 20. Agent	this capacity. e proper and complete performance ition as registered agent. Or, if this e address, I hereby confirm that the O-Date	
If signing on beh	half of an entity:		
	se Bell, Asst. Secy.		
Тур	* * * ETT INC TEE. \$25 AG * * *	,	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314