F03000000995

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e.#)
		,
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	1
Certified Copies	Certificates	s of Status
	_	
Special Instructions to	Filing Officer:	•
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Office Use Only



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12/09/16--01020--015 **35.00

SECRETARY OF STATIONS
DIVISION OF CORPORATIONS

DEC 13 2016 C MCNAIR



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscqlobal.com

Date: December 7, 2016

Order#: 365973-021

Re: BARRETTE OUTDOOR LIVING INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Marissa Rather-lopez 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

16 OEC -9 AM 10: 01

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

	· ·	02, 617.0502, 607.1508, or 617.1508, Florida Statutes, ation organized under the laws of the State of OH	this		
		ce or registered agent, or both, in the State of Florida.			
1. The name of	the corporation: BARRETTE C	DUTDOOR LIVING INC.			
	office address:	HEIGHTS OH 44130			
3. The mailing a	ddress (if different):				
	TH MAIN STREET BULLS GA				
4. Date of incorp	poration/qualification: 02/27/2	2003 Document number: F03000000995			
	I street address of the current it tment of State: (If resigned, ea	registered agent and registered office on file with the nter resigned)	e:5·		
	NATIONAL CORPORATE R	RESEARCH,LTD.,INC.	6 . 5.5.5		
	NATIONAL CORPORATE RESEARCH,LTD.,INC. 115 NORTH CALHOUN ST., SUITE 4 Tallahassee FI 32301				
	Tallahassee	FL 32301	9 000 900 900 900 900		
6. The name and (if changed):	street address of the new regi	istered agent (if changed) and /or registered office	新的: 04 新的: 04		
	Corporation Service Compar	ny	.,,-		
	1201 Hays Street				
		P.O. Box NOT acceptable			
	Tallahassee	FL 32301			
The street addre	ess of its registered office and be identical.	the street address of the business office of its registe	red agent,		
Such change wa authorized by th	s authorized by resolution du board, or the corporation ha	aly adopted by its board of directors or by an officer s as been notified in writing of the change.	o		
Xiel (2. agni	Jill Cilmi, Vice President			
Signatur	re of an officer or director	Printed or typed name and title			
I further agree to performance of agent. Or, if this hereby confirm	o comply with the provisions my duties, and I am familiar is document is being filed mer	d agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as regis rely to reflect a change in the registered office addres notified in writing of this change.	stered ss, I		
By: Lina	<u> </u>	11/29/2016			
Sign	nature of Registered Agent	Date			
If signing on bel	half of an entity:				
Grace E. Kirby,	Asst. Vice President				
Ty	ped or Printed Name				

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