F0300003058

(Re	equestor's Name)
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(Ci	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
Special instructions to	rining Officer.	
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Office Use Only



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06/09/08--01032--019 **35.00







June 4, 2008

To Whom It May Concern:

Please file the enclosed Document and return a date stamped copy to my attention. I have enclosed a self address envelope for your convenience.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is $1-800-235-0337 \times 110$

Sincerely,

Jill Probst Corporate Services Department National Service Information, Inc 145 Baker St Marion, Ohio 43302

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: THE SUTPHEN CORPORATIO (Name of Corpora	N tion)		
DOCUMENT NUMBER: F03000003058			
The enclosed Statement of Change of Registered Office/Ager	nt and fee are submitted for filing.		
Please return all correspondence concerning this matter to the	following:		
JILL PROBST			
(Name of Contact P	erson)		
NATIONAL SERVICE INFORMATION, INC (Firm/Company)			
(Compan.	,,		
145 BAKER ST			
(Address)			
MARION OHIO 43302 (City/State and Zip	Code)		
For further information concerning this matter, please call:	,		
•	740) 387-6806 (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		

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

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of OHIO to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of th	ne corporation: THE SUTPHEN CORPORATION	
	office address: 6450 EITERMAN ROAD DUBLIN OH 43016 US	
3. The mailing ad	ldress (if different):	
4. Date of incorpo	oration/qualification: 06/19/2003 Document number: F0300003058	
	street address of the current registered agent and registered 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 /or registered office	· 131
-	NRAI Services, Inc.	
_	2731 Executive Park Drive, Suite 4	Ö
	Weston, FL 33331	
The street addres as changed will b	es of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.	
Mitte	WILLIAM H. THOUGHS	
	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance at I am familiar with and accept the obligation of my position as registered agent. Or, if this ag filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
Jui 1	MINDER ASST Secretary 6-4-08 nature of Registered Agent) (Date)	
If signing on beh		
Jist P	yped or Printed Name)	

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