Division of Corporations **Electronic Filing Cover Sheet** ·

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000288434 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 : (850)521-1000 Phone 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.

Email Address:_

REGISTERED AGENT CHANGE ANDRITZ SEPARATION INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

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

statement of cha	ange is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of Delaware	
	er to change its registered office or registe		
1. The name of	the corporation: ANDRITZ SEPARAT	TON INC.	
2. The principal	office address: 1010 Commercial Blvd	S Arlington TX 76001	
	address (if different); c/o Andritz (USA) GA 30076	Inc. 1115 Northmeadow Parkway,	
4. Date of incorp	poration/qualification: 01/22/2004	Document number: F0400000521	
	d street address of the current registered ag rtment of State:	ent and registered office on file with the	
	CT Corporation System		
	1200 Pine Island Road	TO BE	
	Plantation FL 33324	757 00 11	
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered office	
	Corporation Service Company		
	1201 Hays Street		
	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301		
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its registered agent,	
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.	
	Jauren Cathell	Maureen Cathell, Vice President	
	ne of an officer or director)	(Printed or typed name and title)	
l further agree i of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statu of a land accept the obliging filed merely to reflect a change in the seen notified in writing of this change. The Service Company	l agree to act in this capacity. tes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	
	,	12/07/2011	
(Sig	gnature of Registered Agent)	(Date)	
If signing on be	half of an entity:		
Sylvia Queppe	et, Asst. Vice President		
(T	yped 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)