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SECRETARY OF STAIR
TALLAHASSEE, FLORID

C Carrothars



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: February 3, 2014

Order#: 975855-003

Re: RAASCH ASSOCIATES, 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: Evelyn Wright

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

	•	2, 617.0502, 607.1508, or 617.1508, Flo tion organized under the laws of the Sta		
-		e or registered agent, or both, in the Sta	·	
1. The name o	f the corporation: RAASCH ASS	SOCIATES, INC.		
	al office address: COURT,GREEN BAY WI 54313			
3. The mailing	address (if different):			
4. Date of inco	orporation/qualification: 01/21/2	2004 Document number: F0-	400000566	
	nd street address of the current re artment of State: (If resigned, en	egistered agent and registered office on ter resigned)	file with the	
	CT CORPORATION SYSTEM	М		
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION	FL 33324		
6. The name a (if changed)	9	stered agent (if changed) and /or register	red office	
	1201 Hays Street			
	P Tallahassee	O. Box NOT acceptable FL 32301		
		the street address of the business office ly adopted by its board of directors or b is been notified in writing of the change		
aumorized by	the orange, or the corporation ha	Dona Priebe	Fice President	
Signs	iture of an officer or director	Printed or typed name	J. i	
I further agree performance of agent. Or, if the hereby confirm	e to comply with the provisions of My duties, and I am familiar v his document is being filed mer	l agent and agree to act in this capacity of all statutes relative to the proper and with and accept the obligation of my poely to reflect a change in the registered notified in writing of this change.	d complète sition as régis le red	
By: Lino	ca C.T.V.O.U. ignature of Registered Agent	01/27/2014 Date		
	pehalf of an entity:			
Grace E. Kirb	y, Assist. VP			
	Typed or Printed Name	_		

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