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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (614)280-3338

Fax Number

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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REGISTERED AGENT CHANGE BERTHOLD TYPES LIMITED INCORPORATED

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COVER LETTER

	endment Section ision of Corporations					
	BERTHOLD TYPES LIMITED INCORPORATED)				
SUBJECT:	Name of Corpo	ration				
DOCUMEN	F04000003530 NT NUMBER:					
The enclose	d Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.				
	n all correspondence concerning this matter to					
	Melissa M. Hunt, Vice President & General (Counsel				
	Name of Contact	Person				
	BERTHOLD TYPES LIMITED INCORPORATED					
	Firm/Сопф.	ıny				
	47 W. POLK ST. #100 - 340					
	Address					
	CHICAGO, IŁ. 60605					
	City/State and Z	p Code				
	ip@bertholdtypes.com					
	E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:						
Melissa M. I	Hant	386 237-1685				
	Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section	Street Address: Amendment Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

CR2E045 (03/12)

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PL004 - 05/30/2013 Wolters Klewer Online

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

statement of chang	e is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statute: ized under the laws of the State of Alinois red agent, or both, in the State of Florida.			
I. The name of the	corporation: BERTHOLD TYPES LIMI	TED INCORPORATED			
2. The principal of CHICAGO, IL C	fice address: 47 W. POLK ST. #100 - 340				
3. The mailing add	tress (if different):				
4. Date of incorpor	ration/qualification: 06/22/2004	Document number: P04000003530			
	treet address of the current registered agent of State: (If resigned, enter resigned	gent and registered office on file with the d)			
c	ORPORATION SERVICE COMPANY				
1:	201 HAYS ST		⊣ ω		
<u></u>	ALLAHASSEE, FL 32301		ALLAHA Segrey		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
c	T Corporation System		A		
d	o C T Corporation System, 1200 South Pi	ne Island Road			
P	P.O. Bos. NOT: lantation, Florida 33324	acceptable	हाड़ अहर अहर		
The street address as changed will be	of its registered office and the street a identical.	address of the business office of its regist	ered agent,		
Such change was authorized by the	authorized by resolution duly adopted board, or the corporation has been not		so		
- Mylis	of all extends	Melissa M. Hunt, VP & General Counsel Printed or typed name and title			
		l agree to act in this capacity, nes relative to the proper and complete coept the obligation of my position as reg ct a change in the registered office addre writing of this change.	ristered ess, I		
By: Oanilar Vincant 08/09/2017					
	ere of Registated Agent	Date			
If signing on behal	If of an entity:				
Jenifer Vincent, VP					
тура	d or Printed Name * * * FTT ING WEB	F- <14 An + + +			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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