## Division of Corporations

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Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 12000000195 : (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 IN-SITU, INC.

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

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Corporate Filing Menu

Help

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

statement of cha	inge is submitted for a corporation org	502, 607.1508, or 617.1508, Florida Stat anized under the laws of the State of $\underline{W}$ istered agent, or both, in the State of Flor	oming
The name of t	the corporation: IN-SITU, INC.		
2. The principal	office address: 221 East Lincoln Av	venue, Fort Collins, CO 80524	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 01/20/2005	Document number: F0500000	0334
5. The name and	d street address of the current registered trment of State:	d agent and registered office on file with	the
	NRAI Services, Inc		
	2731 Executive Park Drive, Suit	e 4	2018 TAL
	Weston, FL 33331		2010 DEC -8 SECRETAR'S TALLAHASS
6. The name and (if changed):	d street address of the new registered a	gent (if changed) and /or registered office	
	Corporation Service Company		OF STATE
	1201 Hays Street	•	器品品
	(P.O. Box NOT accepts	abie)	True.
	Tallahassee, FL 32301		
The street address changed will	ess of its registered office and the stre be identical.	eet address of the business office of its r	egistered agent,
Such change was authorized by the	as authorized by resolution duly adop he board, or the corporation has been	oted by its board of directors or by an of notified in writing of the change.	fficer so
20	mea Loch	Blanca Lozada, Attorney in Fac	
I hereby accept I further agree of my duties, an document is bei corporation has	s been noujieu in writing oj inis chur	(Printed or typed name and little and agree to act in this capacity taintes relative to the proper and composition as registered on the registered of the registered of the registered office address, I hereby age.	•
By:	on Service Company	12/08/2010	
Si	gnature of Registered Agent)	(Date)	The state of the s
If signing on be	chalf of an entity:		
	et, Asst. Vice President		
	Typed or Printed Name)	TYOTE - #44 AA + + +	

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