F05000006239

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EXAMINER

JUN 29 2011



CORPORATION SERVICE COMPANY.

ACCOUNT NO. : I2000000195

REFERENCE :

820253 7837084

AUTHORIZATION (

COST LIMIT : ''\$\35.0

ORDER DATE: June 21, 2011

ORDER TIME : 10:33 AM

ORDER NO. : 820253-008

CUSTOMER NO: 7837084

CHANGE OF AGENT

NAME: CNC ASSOCIATES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

EXAMINER'S INITIALS:

FILEU

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of California er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: CNCA, INC.	
2. The principal	office address: 2900 Challenger Place, Oxnard, CA 93030	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 10/24/2005 Document number: F05000006239	
	d street address of the current registered agent and registered office on file with the rtment of State:	
	CT Corporation System	
	1200 South Pine Island Rd	
	Plantation FL 33324	
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 Corporation Service Company 1202 Hays Street	
	1201 Hays Street	, , ,
	(P.O. Box NOT acceptable)	2 (
	Tallahassee, FL 32301 $\frac{\pi}{100}$	
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	- 5
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
ー ル・ルス	Maureen Cathell, Vice President (Printed or typed name and title)	
I hereby accept I further agree t of my duties, an document is beli corporation has	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 ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
$\mathbf{p}_{\mathbf{w}} \leq 1$	on Service Company (-21 - 201) (Date)	
(Sig	graffite of Registered Agent) (Date)	
If signing on bel	chalf of an entity:	
Sylvia Queppe	et, Asst. VP	
(T	Гуреd or Printed Name)	

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