F060000000548

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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10/28/13--01029--018 **35.00

APPROVED AND FILED 13 OCT 28 AM II: 23 SECRETARY OF STATE ALLAHASSE F STATE

C. LEWIS
NOV 4 2013
EXAMINER



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Smetana

Date: October 24, 2013

Order#: 849624-065

Re: FLATIRON WEST, 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: Alex Smetana 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

APPROVER AND

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

statement of ch	e provisions of sections 607.0502, 617.05 nange is submitted for a corporation orga	nized under the laws	of the State of [Delaware		
in ord	ler to change its registered office or regis	tered agent, or both,	in the State of F	lorida.		
1. The name of	the corporation: FLATIRON WEST, IN	1C.				
2. The principa	al office address:					
10188 E. I-	25 Frontage Road, Firestone, CO 80504	1-5445				
3. The mailing	address (if different):			<u> </u>		
4. Date of incom	0000548					
	nd street address of the current registered artment of State: (If resigned, enter resign		office on file wit	th the		
	C T Corporation System					
	1200 South Pine Island Road			TAT	<u>.</u>	
	Plantation	FL 3	3324	ECRE LLAH	2001	
6. The name an (if changed):	nd street address of the new registered age	nt (if changed) and /	or registered offi	ASSE A	ى 0	
	Corporation Service Company			ELFLOW ELFLOW	-	
	1201 Hays Street				သ သ	
	P.O. Box NOT acceptable					
	Tallahassee	FL 3:	2301			
The street addr as changed will	ress of its registered office and the street I be identical.	address of the busin	ness office of its	registered agent	••	
Such change w authorized by t	as authorized by resolution duly adopted the board, or the corporation has been no	d by its board of dire tified in writing of t	ectors or by an o he change.	fficer so		
			Dona Priebe	Vice President		
I hereby accept I further agree performance of agent. Or, if the hereby confirm	ute of anytticer of director I the appointment as registered agent an to comply with the provisions of all stat f my duties, and I am familiar with and a his document is being filed merely to refle that the corporation has been notified i on Service Company	d garee to act in this	n typed name and title s capacity. proper and comp n of my position of registered office inge.			
By:	10/18/2013					
	gnature of Registered Agent	of Registered Agent Date				
If signing on be	ehalf of an entity:					
Grace E. Kirby						
T	Typed or Printed Name					
	* * * FILING FE	E: \$35.00 * * *				

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314