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DEPARTMENT OF STAT

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SECRETARY OF STATE
SECRETARY OF STATE

IJAN 24 2013

T. ROBERTS



CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE : 504014

7918624

AUTHORIZATION :

COST LIMIT : \$ 35.00

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ORDER DATE: January 22, 2013

ORDER TIME : 4:01 PM

ORDER NO. : 504014-004

CUSTOMER NO: 7918624

## CHANGE OF AGENT

NAME: PACKERLAND BROKERAGE SERVICES,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

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

statement of char	nge is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of Wisconsin red agent, or both, in the State of Florida.	
The name of the corporation: Packerland Brokerage Services, Inc.			
2. The principal of			
3. The mailing ad	ddress (if different):		
4. Date of incorpo	oration/qualification: 06/26/2006	Document number: F0600004368	
	street address of the current registered agment of State: (If resigned, enter resigned	gent and registered office on file with the .	, i.e.,
	R. Scott Shelley		
	1224 North C Street		
	Lake Worth, FL 33460		
6. The name and (if changed):	street address of the new registered agen	t (if changed) and /or registered office	
<u> </u>	Corporation Service Company	E O	
	1201 Hays Street		
- -	PO. Box NOT: Tallahassee, FL 32301	acceptable	
The street addres as changed will b	ss of its registered office and the street a be identical.	ddress of the business office of its registered agent,	
Such change was authorized by the	s authorized by resolution duly adopted e board, or the corporation has been not	by its board of directors or by an officer so filed in writing of the change.	
Signature	of an officer of director	Deb Reeves, Vice President  Printed or typed name and title	
I furthér agrée to performance of n agent. Or, if this hereby confirm th	he appointment as registered agent and comply with the provisions of all statumy duties, and I am familiar with and as document is being filed merely to reflew the corporation has been notified in Service Company	tes relative to the proper and complete cept the obligation of my position as registered ct a change in the registered office address, I	
By: C 6 January 21, 2013			
	ature of Representations Agent	Date	
If signing on beh	•		
Slyvia Queppe	et, Asst. VP		
-71		•	

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

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

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327 CR2E045 (03/12)