Division of Corporations

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Florida Department of State

Division of Corporations

Electronic Billing Coversheet

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To:

Division of Corporations

Fax Number

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From:

Account Name : C

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714

: (850)222-1173

Fax Number

: (850)224-1640

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

Email Address:

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REGISTERED AGENT CHANGE J. CRAIG RIDDLE COMPANY

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

Electronic Filing Menu

Corporate Filing Menu

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H110001979093

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

statement of change is submitted for a corporation organized under the laws of the State in order to change its registered office or registered agent, or both, in the State	of Florida.
1. The name of the corporation: J. CRAIG RIDDLE COMP	ANY
The principal office address: <u>245 South Main Street</u> Madisonville, KY 42431-0011	
3. The mailing address (If different):	
4. Date of incorporation/qualification:Jul 6, 2008Document number:	F06000004578
5. The name and street address of the current registered agent and registered office on fill Florida Department of State: (If resigned, enter resigned)	e with the
CT Corporation System	
1200 South Pine Island Road	
Plantation, Florida 33324	AUG -5
6. The name and street address of the new registered agent (if changed) and /or registere (if changed):	1 117
National Corporate Research, Ltd., Inc.	- ဦးက မ
515 East Park Avenue, P.O. Box NOT acceptable	
Tallahassee, Florida 32301	
The street address of its registered office and the street address of the business office as changed will be identical.	of its registered agent,
Such change was authorized by resolution duly adopted by its board of directors or authorized by the board, or the corporation has been notified in writing of the change	y an officer so t.
Chesley W. Riddle Signature of the officer of director Chesley W. Riddle Printed by typed frame	and little
I hereby accept the appointment as registered agent and agree to act in this capacity is the agree to comply with the provisions of all statutes retailve to the proper an of my duties, and I am familiar with and accept the obligation of my position as regionant is being filed merely to reflect a change in the registered office address, I corporation has been notified in writing of this change.	i, d complete performance stered agent. Or, if this hereby confirm that the
Signalure of Registered Agent Date	2011
If signing on behalf of an entity:	
Lucy Dawson, Assistant Secretary	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/03)

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