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(City/State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·	
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DATE: 4/01/2014

ين. ارتو

NAME: STERLING G. THOMPSON COMPANY

TYPE OF FILING: CHANGE OF AGENT

COST: \$35

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015
AUTHORIZATION: ABBIE PAUL HODGE

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of <u>Kentucky</u> in order to change its registered office or registered agent, or both, in the State of Florida.

. The name of the corporation:	STERLING G. THOMPSON COMPANY
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2. The principal office address:

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-	545 S. Thi	rd St., Ste 300	Louisville	KΥ	40202
	• • • • • • • • • •				
-	and the second				

3. The mailing address (if different):_

4. Date of incorporation/qualification: October 24, 2006 Document number: F06000006746

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

· · · · · · · · · ·	CT Corporation System			
	1200 South Pine Island Road			
	Plantation, FL 33324			
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered of	fice A		
	National Corporate Research, Ltd., Inc.		14 MÅR	
	155 Office Plaza Drive	I Arti ASSE	R 3 I	(*45***** (********
	P.O. Box NOT acceptable Tallahassee, FL 32301	E, FLO	AH IC	
The street oddre	se of its registered office and the street address of the business office of it	te ranistarà	d annian.	+

The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, of the corporation has been notified in writing of the change.

ure of an officer or director

R. Alex Rankin, President

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

hature of Registered Agent

If signing on behalf of an entity:

Lucy Rose, Assistant Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE; FL 32314 CR2E045 (03/12)