

Division of Corporations Public Access System

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2009 JUN -3

REGISTERED AGENT CHANGE

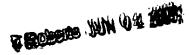
VERMONT TIMBER WORKS, INC.

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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 Statut	es,
	_	corporation organized under the laws of the State of	
Vermont	in order to change its	s registered office or registered agent, or both, in the St	2te
of Florida.	the corporation: Vermont Tir	mber Works, Inc.	
			,
2. The principal	office address: 30 Fairbaile	s Road, North Springfield, VT 05150	
3. The mailing a	address (if different):		<u>9</u>
4. Date of incor	poration/qualification:	19/2007 Document number: F07000000948	<u>J. 13</u>
	rtment of State:	nt registered agent and registered office on file with the	S AH of
	9200 SOUTH DADELAND E		ر
	MIAMI FL 33156	JOOLE 1771 12 00 11 12 00 12 12 12 12 12 12 12 12 12 12 12 12 12	
6. The name as changed):	nd street address of the new Business Filings Incorporated	v registered agent (if changed) and /or registered office	(if
	1203 Governors Square Blvd	d, Suite 101	
1	(P.O. Box or	personal malibox NOT acceptable)	
	Taliahassee, FL 32301-2960)	
The street addragent, as chang	ess of its registered office ar ed will be identical.	nd the street address of the business office of its registere	æd
Such change wauthorized by t	as authorized by resolution (he board, or the corporation	duly adopted by its board of directors or by an officer so has been notified in writing of the change.	1
	r, chairman or vice obserman of the board		
I hereb) accept I further agree performance of registered ages office address,	t the appointment as register to comply with the provision from duties, and I am familiant. Or, if this document is be I hereby confirm that the co	red agent and agree to act in this capacity. ns of all statutes relative to the proper and complete ar with and accept the obligation of my position as eing filed merely to reflect a change in the registered orporation has been notified in writing of this change.	
MUL	Signature of Registered Agent)	<u> 5/22/07</u>	
If signing on beha		(Activity	
Mark Williams		AVP	
	Typed or Prinsed Name)	(Capacity)	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 3Z314