

Fo7000001091

Division of Corporations

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Florida Department of State
Division of Corporations
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Division of Corporations
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Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

EMHART GLASS MANUFACTURING 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 Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: EMHART GLASS MANUFACTURING INC.
2. The principal office address: 13075 US 19 NORTH, CLEARWATER FL 33764
3. The mailing address (if different): 1140 SULLIVAN ST, ELMIRA, NY 14901
4. Date of incorporation/qualification: 2/22/2007 Document number: F07000001091

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301-2525 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

(P.O. Box NOT acceptable)

Plantation, Florida 33324

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, or the corporation has been notified in writing of the change.

X Susan T. Mathers
(Signature of an officer or director)

Susan T. Mathers
(Printed or typed name and title)

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.

By: Kristine Heiberger
(Signature of Registered Agent)

6/3/2008
(Date)

If signing on behalf of an entity:

Kristine Heiberger
Assistant Secretary

(Typed or Printed Name)

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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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