## F07000006125

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP , WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
<u> </u>						



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11/12/13--01040--019 \*\*35.00

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Office Use Only

NOV 1 5 2013 T. CARTER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: November 8, 2013

Order#: 863417-139

Re: SWETT & CRAWFORD OF GEORGIA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Vera M. Norris c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## · Arrive

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

statement of cha	orovisions of sections 60/.0502, 61/. nge is submitted for a corporation of r to change its registered office or re	rganized under the la	ws of the State of	Delaware		-
	he corporation: SWETT & CRAWFO		·			
2. The principal	office address:nis Ferry Road, Suite 300, Suwanee					
***************************************	ddress (if different):			<del></del>		
4. Date of incorp	poration/qualification: 12/14/2007	Document	number: F070006	006125		
	street address of the current register tment of State: (If resigned, enter res		ed office on file w	ith the		
	C T Corporation System					
1200 South Pine Island Road, Suite 300						
	Plantation	FL	30024		I3 NOV	T CS
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed):					2	AN ANVEST
	Corporation Service Company	······································			船川: 2	-35 공공
•	1201 Hays Street					ADA ADA
	P.O Box Tallahassee	NOT acceptable FL	32301			
	ess of its registered office and the str be identical.  Is authorized by resolution duly ado the board, or the corporation has been					nt,
· / / / /		D	ona Priebe	Vice President		nt
I further agree in performance of agent. Or, if the hereby confirm Corporatio	the appointment as registered agent the appointment as registered agent of comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notific n Service Company	t and agree to act in statutes relative to the	he proper and con tion of my position he registered offic change.	nplete n as regis	tered s, l	-
By: ) ) nc	nature of Registered Agent		Date			-
If signing on be	half of an entity:					
Grace E. Kirby,	Asst. Vice President					
T	ped or Printed Name					

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