

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

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

Email Address:_

2010 MAY 27 MM 8: 06 SECRETARY OF STATE ALLAHA'SSEEFEORID

REGISTERED AGENT CHANGE SCHMITT-SUSSMAN ENTERPRISES, INC.

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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

statement of cha	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organiza r to change its registered office or registera	ed under the laws of the State of $\overline{ ext{Dela}}$	ware
1. The name of t	he corporation: SCHMITT-SUSSM	AN ENTERPRISES, INC.	
2. The principal	office address: 34 Prindle Hill Road		
 	Orange CT 06477		
3. The mailing a	ddress (if different): PO Box 1500		
	Orange CT 0647		
4. Date of incorp	poration/qualification: 09/17/2008	Document number: F08000004	4086
5. The name and	street address of the current registered age tment of State:	ent and registered office on file with the	
	C T Corporation System		FA 60 10 10 10 10 10 10 10 10 10 10 10 10 10
	1200 South Pine Island Road		MAY T
	Plantation FL 33324		27 27 28 28
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office	PH 1:3
	Corporation Service Company		
	1201 Hays Street		
	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301		
	ess of its registered office and the street as be identical.		
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the extraoration has been not	by its board of directors or by an offic fied in writing of the change.	er so
Bla	nea Lyph	Blanca Lozada, Attorney in Fact	
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statut d I am familiar with and accept the oblig ng filed merely to reflect a change in the s been notified in writing of this change.	(Frinted or typed name and title) agree to act in this capacity, les relative to the proper and complete ation of my position as registered age registered office address, I hereby con	e performance ent. Or, if this nfirm that the
Corpora	tion Service Company	May 25, 2010	
<u>Бу.</u>	mature of Registered Agent)	May 25, 2010 (Date)	
If signing on be	half of an entity:		
Sylvia Quer	ppet, Assistant VP		
C	Typed or Printed Name)		
	* * * FILING FE	C: \$35.00 * * *	

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

CR2E045 (8/05)