## F08000004421

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Michele Mercer michele.mercer@cscglobal.com

Date: June 9, 2017

Order#: 671334-003

Re: BARTONPARTNERS ARCHITECTS PLANNERS, 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: Michele Mercer

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.

OUCA.XCOA

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

statement of ch	ange is submitted for a corp	0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this poration organized under the laws of the State of PA office or registered agent, or both, in the State of Florida.	<del></del>
		PARTNERS ARCHITECTS PLANNERS, INC.	
2. The principa	l office address:	NORRISTOWN PA 19401	
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 10/0	09/2008 Document number: F08000004421	
	d street address of the current firtment of State: (If resigned	nt registered agent and registered office on file with the l, enter resigned)	
	INTERNATIONAL CORPO	ORATE SOLUTIONS, INC.	
	155 OFFICE PLAZA DRIV	ve	
	TALLAHASSEE	FL 32301	
6. The name an (if changed):		registered agent (if changed) and /or registered office	TO NOISIVA
	Corporation Service Com	pany	ر المراكز المراكز
	1201 Hays Street		
	Tallahassee	PO Box NOT acceptable FL 32301	ب. ت
The street addr as changed will	ess of its registered office a I be identical.	and the street address of the business office of its registered as	gent,
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.	
, XC	$\sim$ ( , $\sim$ $\sim$ $\sim$ $\sim$	Jill Cilmi, Vice President	
(-)	ure of an officer or director	Printed or typed name and title	<del></del>
I further agree performance of agent. Or, it th hereby confirm	to comply with the provisio fmy duties, and I am famili	rred agent and agree to act in this capacity, ms of all statutes relative to the proper and complete ar with and accept the obligation of my position as registered merely to reflect a change in the registered office address, I cen notified in writing of this change.	ı
By:	rae Ctuble	06/06/2017	
•	gnature of Registered Agent \	Date	
If signing on be	chalf of an entity:		
	, Assistant Vice President		
1	Syped or Printed Name		

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