

F09000001780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

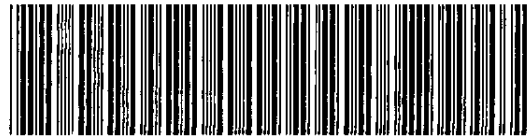
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 APR 22 AM 11:03

*P. A. Charge*  
C.COULLETTE

APR 25 2011

EXAMINER

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Partlan-Labadie Sheet Metal Co.  
Name of Corporation

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maryanne Barsotti  
Name of Contact Person

Partlan-Labadie Sheet Metal Co.  
Firm/Company

12901 Cloverdale  
Address

Oak Park, MI 48237  
City/State and Zip Code

mbarsotti@partlanlabadie.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maryanne Barsotti at ( 248 ) 545-0434  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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 Michigan  
\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Partlan-Labadie Sheet Metal Company
2. The principal office address: 12901 Cloverdale, Oak Park, MI 48237
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4-29-09 Document number: F09000001780

5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State: (If resigned, enter resigned)

Eunice Gallats

2825 SW 22nd Ave., Suite 105

Delray Beach, FL 33445

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

INCSMART FLORIDA, INC.

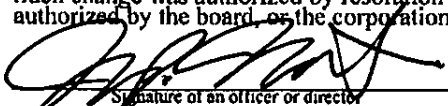
4865 47TH Place

P.O. Box NOT acceptable

Vero Beach, FL 32967

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.

  
\_\_\_\_\_  
Signature of an officer or director

Jeffrey P. Walters  
\_\_\_\_\_  
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.

  
\_\_\_\_\_  
Signature of Registered Agent

4-8-11  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

DAVID OLIVER  
\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$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)

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SECRETARY OF STATE  
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