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

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

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REGISTERED AGENT CHANGE FOSTER NEW BERN, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Corporate Filing Menu

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CR2E045 (8/05)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statunge is submitted for a corporation organized under the laws of the State of $\frac{Non}{n}$	rth Carol	ina	
	r to change its registered office or registered agent, or both, in the State of Flor	ıaa.		
	the conporation: Foster New Bern, Inc.			
2. The principal	office address: 104 South Maine Street, Greenville, SC 29601			
3. The mailing a	ddness (if different); TD Bank, N.A., Legal Dept., P.O. Box 9540, Portlan	nd, ME ()4112	
4. Date of incom	poration/qualification: 6/8/2009 Document number: F09000002	288		
5. The name and	street address of the current registered agent and registered office on file with the timent of State:			
	CT Corporation System			
	1200 South Pine Island Road		v.	
	Plantation, Florida 33324			
6. The name and (if changed):	t street address of the new registered agent (if changed) and /or registered office		10 OCT -1	11
,	Corporation Service Company			The same
	1201 Hays Street	TO THE STATE OF	7	1.2
	(P.O. Box NOT acceptable)	(1) (1)	ب	
	Tallahassee, FL 32301		(E)	
The street addre	ess of its registered office and the street address of the business office of its rebe identical.	gistered :	agent,	
Such change was authorized by th	is authorized by resolution duly adopted by its board of directors or by an off so board, or the corporation has been notified in writing of the change.	icer so		
1 A	Andrea Stead Andrea Stead Andrea Stead		. See	rdan
I hereby accept I further agree i of my duties, an document is bei corporation has Corporati	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comple of am familiar with and accept the obligation of my position as registered agent field merely to reflect a change in the registered office address, I hereby to be a parting of this change. Second of the property of this change.	ste perfors gent. Or, onfirm th	mance if this at the	س
By:	/0-/-/0 migrate of Registered Agent) (Dnie)			
-				
	half of an entity: Troy Todd			
	26 its 2027i yped or Printed Name)			
ν.	* * * FH.ING FEE: \$35.00 * * *			

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