0900000339

Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

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To:

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From:

Account Name : INCORP SERVICES INC

Account · Number : I20120000007 Phone

: (702)866-2500

Fax Number

: (702)866-2689

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REGISTERED AGENT CHANGE AMERICAN FLUORITE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

COVER LETTER

	ndment Section sion of Corporations
SUBJECT:_	American Fluorite, Inc.
	Name of Corporation
DOCUMEN	T NUMBER: F09000003392
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:
	Kathy Shin Name of Contact Person
	Name of Contact Person
	InCorp Services, Inc.
	Firm/Company
	3773 Howard Hughes Pkwy · Suite 500S
	Address
	Las Vegas, NV 89169-6014
	City/State and Zip Code
	managadranarta@inaarn.com
	managedreports@incorp.com E-mail address: (to be used for future annual report notification)
For further is	nformation concerning this matter, please call:
Kathy Shin	on behalf of InCorp Services, Inc. at (702) 866-2500 Name of Contact Person Area Code & Daytime Telephone Number
	· · · · · · · · · · · · · · · · · · ·

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

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

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

CR2E045 (03/12)

H 16000 | 383613

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 Statutes, t ange is submitted for a corporation organized under the laws of the State of Texas r to change its registered office or registered agent, or both, in the State of Florida.	nis
1. The name of t	the corporation: American Fluorite, Inc.	
2. The principal	office address: 1425 Lake Front Cir., Suite 200 The Woodlands, TX 7730	30
3. The mailing a	address (if different):	· ·
4. Date of incorp	poration/qualification: 08/25/2009 Document number: F09000003392	!
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	C T CORPORATION SYSTEM	
	1200 South Pine Island Road	28
	Plantation, FL 33324	2016 JUN -7
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	InCorp Services, Inc.	AN 10:
	17888 67th Court North): 16
	P.O. Box NOT acceptable Loxahatchee, FL 33470	u,
The street address changed will	ess of its registered office and the street address of the business office of its registen be identical.	ed agent,
Such change we authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so he board or the corporation has been notified in writing of the change.	
1/1/1	Margaret Woodward-Molleston, Vice P	resident
I hereivy accept I further agree performance of agent. Or, if the hereby confirm	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 camplete my duties, and I am familiar with and accept the obligation of my position as regist is document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change. April 22, 2016 gature of Weinstered Agent	ered i, I
	shalf of an entity:	
	on behalf of InCorp Services, Inc.	

* * * 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 (03/12)

4 (6000) 383613