F1000000608

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
(orty-ordio-ziph none #)
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TARO C



COVER LETTER

TO: Amendmen Division of	t Section Corporations		
SUBJECT:	P.C. SCAL	E, INC	
3000001	P.C. SCAL Name of C	orporation ·	
DOCUMENT NU	MBER:F100	000000608	
The enclosed Statem	nent of Change of Registered Office	e/Agent and fee are subm	itted for filing.
Please return all cor	respondence concerning this matter	to the following:	
•		•	
_	Wend	y Rea	
	Name of Co	ntact Person	,
•	NF.	Al ·	
	rim/Co	ompany	
	44000 0 11	Division Octobre 040	
•	11600 College Add	Blvd, Suite 210	
	Add	1055	
•	Overland Par	k, KS 66210 Id Zip Code	
	City/State at	d Zip Code	** 1 [**4*
	info@nra	ai.com	
-	info@nra E-mail address: (to be used for f	uture annual report noti	fication)
For further informat	ion concerning this matter, please o	all:	
	Wendy Rea	at (800)	550-6724
Nam	e of Contact Person	at (<u>800</u>) Area Code & Dayt	ime Telephone Number
Enclosed is a \$35.00	check made payable to the Depart	ment of State.	
	Mailing Address: Amendment Section	Street Address Amendment S	<u>:</u> ection
	Division of Corporations	Division of Co	
	P.O. Box 6327	Clifton Buildi	•
	Tallahassee, FL 32314		e Center Circle
		Tallahassee F	

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

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this ingle is submitted for a corporation organized under the laws of the State of PA	
2. The principal	office address: 119 SOUTH FIFTH STREET PA 19363	
-	nddress (if different): P.O. BOX 98 D PA 19363	_
4. Date of incorp	poration/qualification: 02/04/2010 Document number: F10000000608	_
	i street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)	
	CORPORATION SERVICE COMPANY	
	1201 HAYS STREET	
	TALLAHASSEE FL 32301-2525	
6. The name and (if changed):	NRAI Services Inc	しまるし
	515 Fast Park Avenue	_
	DO 00 2000	2
	Tallahassee, FL 32301	
	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.	
Signature	GAIL TEFFT Secretary Printed or typed name and trile	1
thin mer agree to finny duties, and document is bein corporation has NRAI Service	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance if am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
Wendy	DRea Assistant bed or Printed Name, Secretary *** FILING FER: \$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)

COVER LETTER

TO: Amendment Secti Division of Corpo	on rations		
SUBJECT:	P.C. SCALI Name of Co	E, INC proporation	
DOCUMENT NUMBER	:F100	000000608	
The enclosed Statement of	Change of Registered Office	/Agent and fee are submi	itted for filing.
Please return all correspon	dence concerning this matter	to the following:	
·	-	-	
	Wendy Name of Con	/ Rea	
_ 	Name of Con	tact Person	· · · · · · · · · · · · · · · · · · ·
	NR. Firm/Co		
	rim/Co	mpany	
	11600 Collogo F	Alvel Suite 210	
	11600 College E Addr		
	Overland Park	c. KS 66210	
 ,	City/State and	d Zip Code	
	info@nro	ioom	•
E-mail	info@nra address: (to be used for fu		fication)
	`	•	,
For further information cor	ncerning this matter, please ca	ıll:	
Wen	dy Rea	at (800)	550-6724
	ontact Person	at (<u>800</u>) Area Code & Dayti	me Telephone Number
Enclosed is a \$35.00 check	made payable to the Departm	nent of State.	
M	illing Address:	Street Address:	
	nendment Section vision of Corporations	Amendment Se Division of Co	
	D. Box 6327	Clifton Buildin	•
Та	llahassee, FL 32314		e Center Circle

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 PA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: P.C. SCALE, INC
2. The principal office address: 119 SOUTH FIFTH STREET OXFORD PA 19363
3. The mailing address (if different); P.O. BOX 98 OXFORD PA 19363
4. Date of incorporation/qualification: 02/04/2010 Document number: F10000000608
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)
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
NRAI Services, Inc.
515 East Park Avenue
P.O. Box NOT acceptable
Tallahassee, FL 32301
The street address of its registered office and the street address of the business office of its registered agents is 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 antoliker or director GAIL TEFFT Secretary
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 position as registered agent. Or, if this lociument 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. NRAI Services, MC
Date Date
Secretary Secretary Typed or Printed Name Secretary Secretary

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

CR2E045 (8/05)