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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY Account Number : I20000000195

Account Number : I20000000195
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REGISTERED AGENT CHANGE INTERMECH, INC.

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Help

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.15 nange is submitted for a corporation organized under the laws of t	he State of Delaware
	ler to change its registered office or registered agent, or both, in t	he State of Florida.
1. The name of t	f the corporation: INTERMECH, INC.	
2. The principal	al office address: 3901 WESTPOINT BLVD., SUITE 100	
WINSTON	N-SALEM NC 27103	
3. The mailing a	address (if different):	
4. Date of incorp	exporation/qualification: 06/11/2010 Document number	эт. <u>F10000002704</u>
	nd street address of the current registered agent and registered offi artment of State:	ce on file with the
	NRAI SERVICES, INC.	
	2731 EXECUTIVE PARK DR., STE 4	
	WESTON FL 33331 US	11 HAR
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or r	egistered office
	Corporation Service Company	3
	1201 Hays Street	- t
	. (P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	
The street address changed will	tress of its registered office and the street address of the busines ill be identical.	s office of its registered agent,
Such change we authorized by the	was authorized by resolution duly adopted by its board of direct the board, or the corporation has been notified in writing of the	ors or by an officer so change.
	R. Kevin Matz, V	
I hereby accept I further agree of my duties, an document is bet corporation ha By: Gif If signing on be	where of an ellipse of director (Printed or of the appointment as registered agent and agree to act in this are to comply with the provisions of all statutes relative to the pround I am familiar with and accept the obligation of my position eing filed merely to reflect a change in the registered office ado as been notified in writing of this change. Signature of Registered Agent) Signature of Registered Agent) behalf of an entity: HN H. PELLETIER	typed name and title) capacity per and complete performance as registered agent. Or, if this lress, I hereby confirm that the
ASS	Typed of things resident	
	* * * 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)