## F10000003615

(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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05/13/13--01029--003 \*\*35.00



RA Change 05/17/13 Dr



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Kathleen Shields kshields@cscinfo.com

Date: May 9, 2013

Order#: 638195-019

Re: CROWN BUILDING MAINTENANCE CO.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX \_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Kathleen Shields c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	inge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of <u>California</u> or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: CROWN BUIL	DING MAINTENANCE CO.	
2. The principal	office address: m Street, San Francisco, C		
_	ddress (if different): n Creek Road, Scotts Valle	y, CA 95066	
4. Date of incorp	poration/qualification: 08/10/2	010 Document number: F1000003615	
5. The name and		istered agent and registered office on file with the	
	Registered Agent Solution	ns, Inc.	
	155 Office Plaza Drive, Ste. A		
	Tallahassee, FL 32301	e. A 3 7	
6. The name and (if changed):	_	ered agent (if changed) and /or registered office	
	Corporation Service Comp	pany	
	1201 Hays Street	- NOT	
	Tallahassee, FL 32301	Box NOT acceptable	
The street addre	ess of its registered office and the be identical.	e street address of the business office of its registered agent,	
		adopted by its board of directors or by an officer so been notified in writing of the change.	
()04		Dona Priebe, Vice President	
	te of an officer or director	Printed or typed name and title	
I further agree t performance of agent. Or, if thi hereby confirm	to comply with the provisions of	gent and agree to act in this capacity. all statutes relative to the proper and complete th and accept the obligation of my position as registered y to reflect a change in the registered office address, I otified in writing of this change.	
By: Class	nature of Registered Agent	05/06/2013  Date	
~	half of an entity:	Date	
Elizabeth A. I	Dawson, Asst. Vice Preside	ent	
	roed or Printed Name	_	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*