FIDOCOCO 154

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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800301469658

JUL 19 2017 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 730035 7391888						
AUTHORIZATION : TOURIS A						
COST LIMIT : \$ 35.00						
ORDER DATE : July 18, 2017						
ORDER TIME : 4:01 PM						
ORDER NO. : 730035-040						
CUSTOMER NO: 7391888						
	-					
CHANGE OF AGENT						
NAME: L J ROSS ASSOCIATES, INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Melissa Zender						

EXAMINER'S INITIALS:

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

statement of cha	ange is submitted for a	607.0502, 617.0502, 607.15 corporation organized und red office or registered ager	ler the la	iws of the State of _	·	<i>s</i>	
1. The name of	the corporation: L J Ro	oss Associates, Inc.					
	•	ersal Way, Jackson MI 492	202				٠
3. The mailing a	address (if different):	O Box 6099 Jackson MI 4	9204				
4. Date of incor	Date of incorporation/qualification: 01/12/2011 Document number: F11000					<u></u>	
	d street address of the criment of State: (If resi	current registered agent and gned, enter resigned)	register	ed office on file wi	ith the		
	C T CORPORATION	SYSTEM					
	1200 SOUTH PINE IS	SLAND ROAD	· · · · · ·				
	PLANTATION, FL 33	3324			<u>.</u>	17	
6. The name and (if changed):	d street address of the r	new registered agent (if chai			fice $\frac{1}{2}$	JUL 18	 :
	Corporation Service	Company			[]	₩ ₩	-
	1201 Hays Street					œ	•
	Tallahassee	P.O Box NOT acceptable	FL	32301	E.	55	
The street address changed will	ess of its registered off be identical.	fice and the street address of	of the bu	usiness office of its	s registered	agent,	
Such change was authorized by th	as authorized by resolute board, or the corpor	ution duly adopted by its boration has been notified in	oard of o	directors or by an of the change.	officer so		
(JA Ja	bed	Rebeco	ca Robe	erts, President			
I hereby accept I further agree to perform Or, if the hereby confirm Corporation By:	to comply with the pro my duties, and I am fa	egistered agent and agree to wisions of all statutes relat miliar with and accept the iled merely to reflect a cha las been notified in writing	o act in tive to the	he proper and com	iplete	red [
If signing on be	half of an entity:						
	Melissa Zender						
Ā	Kr. Vice President	 ,					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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