Division of Corporations **Electronic Filing Cover Sheet**

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(((H16000027178 3)))



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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA00000023
Phone: (850)205-8842
Fax Number: (850)878-5368 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE GERMAN AMERICAN CHAMBER OF COMMERCE OF THE SOUTHERN



| Certificate of Status | 0 |
|-----------------------|---------|
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Electronic Filing Menu

Corporate Filing Menu

Help

FEB - 3 2016

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COVER LETTER

| TO: | | endment Section sion of Corporations | 8 | | |
|--------|----------------------------------------------------------------|------------------------------------------------------------------------------------|----|--|--|
| SUBJ | | GERMAN AMERICAN CHAMBER OF COMMERCE OF | ζ- | | |
| 0000 | #2 ~ | Name of Corporation | | | |
| DOCI | UMEN | F13000003430 NT NUMBER: | | | |
| The er | nclosed | d Statement of Change of Registered Office/Agent and fee are submitted for filing. | | | |
| Picase | return | n all correspondence concerning this matter to the following: | | | |
| | | Betty Weller | | | |
| | | Name of Contact Person | | | |
| | German American Chamber of Commerce of the Southern U.S., Inc. | | | | |
| | Firm/Company | | | | |
| | i 170 Howell Mill Road NW, Ste 300 | | | | |
| | Address | | | | |
| | Atlanta, GA 30318 | | | | |
| | | City/State and Zip Code | | | |
| | | bweller@gaccsouth.com | | | |
| | | E-mail address: (to be used for future annual report notification) | | | |
| For fi | irther i | information concerning this matter, please call: | | | |
| Betty | Weller | at () | | | |
| | | Name of Contact Person Area Code & Daytime Telephone Numb | er | | |
| Enclo | sed is | a \$35.00 check made payable to the Department of State. | | | |
| | | Mailing Address: Street Address: Amendment Section Amendment Section | | | |
| | | Division of Corporations Division of Corporations | | | |
| | | P.O. Box 6327 Clifton Building | | | |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

CR2E045 (03/12)

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

| statement of cha | nge is submitted for a corporation | 17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Georgia |
|-------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| in order | to change its registered office or | registered agent, or both, in the State of Florida. |
| 1. The name of t | GERMAN AMERICAN | CHAMBER OF COMMERCE OF THE SOUTHERN UNITED STATES, INC. |
| 2. The principal | office address: 1170 HOWELL MI | LL ROAD, SUITE 300 ATLANTA, GA 30318 |
| 3. The mailing a | ddress (if different): | |
| 4. Date of incorp | poration/qualification: 08/06/2013 | Document number: F13000003430 |
| | street address of the current regis tment of State: (If resigned, enter | stered agent and registered office on file with the resigned) |
| | Corporate Creations | |
| | 11380 Prosperity Farms Road #22 | IE Q |
| | Palm Beach Gardens, FL 33410 | 76 F |
| 6. The name and (if changed): | street address of the new register | ed agent (if changed) and /or registered office |
| | C T Corporation System | South Pine Island Road |
| | c/o C T Corporation System, 1200 | |
| | P.O. I | Box NOT acceptable |
| | | |
| The street address changed will | ss of its registered office and the be identical. | street address of the business office of its registered agent, |
| Such change was authorized by th | s authorized by resolution duly a le board, or the corporation has b | dopted by its board of directors or by an officer so een notified in writing of the change. |
| al z | Hollingo | Martina Stellmaszek, President & CEO |
| • • • | e of an officer or director | Printed or typed name and true |
| vertormance of | my duties, and I am tamiliar will | tent and agree to act in this capacity. The statutes relative to the proper and complete In and accept the obligation of my position as registered To reflect a change in the registered office address, I Utified in writing of this change. |
| By: | | 8/6/2014 |
| Sign | nature of Registered Agent | Date |
| If signing on be | half of an entity: | |
| lordan Brown, | Assistant Secretary | |
| T | ped or Printed Name | • |

* * * 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)