## F14000004177

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NOV 2 0 2015 J SHIVERS CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 878019 7685778 AUTHORIZATION COST LIMIT : ORDER DATE: November 18, 2015 ORDER TIME : 4:04 PM ORDER NO. : 878019-015 CUSTOMER NO: 7685778 CHANGE OF AGENT NAME: CUMING-LEHMAN CHAMBERS, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS:

## **COVER LETTER**

TO: Ar Di	mendment Section ivision of Corporations		
SUBJECT	Cuming-Lehman Chambers, Inc.		
SUBJECT	Name of Corporation		
DOCUME	F14000004137 ENT NUMBER:		
	sed Statement of Change of Registered Office/Agent and fee are submitted for fil	ling.	
	um all correspondence concerning this matter to the following:	J	
	Ruth Fehrman, Paralegal		
	Name of Contact Person		
	PPG Aerospace		
	Firm/Company		
	12780 San Fernando Road		
	Address	~	
	Sylmar, California 91342		7
	City/State and Zip Code	A SEC	5
	ECRETARY ECRETARY	- ( ) ; **	
	E-mail address: (to be used for future annual report notification)		E com
		OF STATE E. FLORID	; · · · ·
For further	information concerning this matter, please call:	RED.	
Rose Solte	esz, Tax Department 412 4344368 at ( )	ختن	
	Name of Contact Person Area Code & Daytime Teleph	ione Number	
Enclosed is	s a \$35.00 check made payable to the Department of State.		
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of Corporation	ıs	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

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statement of ch	provisions of sections 607.0502, 617 ange is submitted for a corporation over to change its registered office or r	organized under the la	rws of the State	of Massachusetts
1. The name of	the corporation: Cuming-Lehman Cl	hambers, Inc.		
	office address: 264 Bodwell Street,			
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 10/01/2014	Document	number: F1400	00004137
	d street address of the current registe rtment of State: (If resigned, enter re		ed office on file	with the
	Registered Agent Solutions, Inc.			
	155 Office Plaza Drive, Suite A	-		<del></del>
	Tallahassee	FL	32301	
6. The name and (if changed):	d street address of the new registered  Corporation Service Company	agent (if changed) an	d /or registered	15 NOV 19 SECRETARY FALL AHASS
	1201 Hays Street			19
		NOT acceptable		
	Tallahassee	FL	32301	_ 5 <b></b>
The street address changed will	ess of its registered office and the st be identical.	reet address of the bu	siness office of	≥≥ ω its registered agent, >>
Such change wa	as authorized by resolution duly add ne board, or the corporation has bee	opted by its board of d in notified in writing o	lirectors or by a of the change.	ın officer so
7/2	Tallohi	Barry N. Gillesp	oie	President
I hereby accept I further agree performance of agent. Or, if th hereby confirm Corporatio	the appointment as registered agento the appointment as registered agento comply with the provisions of all my duties, and I am familiar with a sis document is being filed merely to that the corporation has been notificated to the corporation of the corporation has been notificated to	nt and agree to act in	d or typed name and this capacity, e proper and c ion of my positi he registered of change.	
By: (	nature of Registered Agent		Date	
If signing on be	halfefeyewillams			
	st. Vice President			
	yped or Printed Name			

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