3/15/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000071443 3)))



H170000714433ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:

## REGISTERED AGENT CHANGE TODD & SARGENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

1'08 1 6 2016 T. LEMIEUX Mo

ТО		
COMPANY		
FAXNUMBER	18506176380	
FROM	Ranae McGraw	
DATE	2017-03-15 06:00:43 CST	
RE	TODD & SARGENT, INC.	

## **COVER MESSAGE**

Kaity Toon
Associate Fulfillment Specialist
Fulfillment Operations
CT Corporation

Team (614) 280-3338
GlobalFulfillmentTeam@wolterskluwer.com



4400 Easton Commons Way Suite 125 Columbus, Ohio 43219 www.wolterskluwer.com

Confidentiality Notice: This email and its attachments (if any) contain confidential information of the sender. The information is intended only for the use by the direct addressees of the original sender of this email. If you are not an intended recipient of the original sender (or responsible for delivering the message to such person), you are hereby notified that any review, disclosure, copying, distribution or the taking of any action in reliance of the contents of and attachments to this email is strictly prohibited. If you have received this email in error, please immediately notify the sender at the address shown berein and permanently delete any copies of this email (digital or paper) in your possession.

## **COVER LETTER**

	mendment Section ivision of Corporations	
SUBJECT	TODD & SARGENT, INC.	
SOBJECI	Name of Corp	oration
DOCUME	F16000003989 ENT NUMBER:	
The enclos	sed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
	irn all correspondence concerning this matter to	
		· ·
	CINDY KENNEDY	
	Name of Contac	t Person
	THE SARGENT GROUP, INC.	
	Firm/Comp	eany
	2905 SE 5th St	
	Address	
	Ames 1A, 50010-9761	
	City/State and 2	ip Code
	CKENNEDY@TSARGENT.COM	
	E-mail address: (to be used for futu	re annual report notification)
		,
For further	information concerning this matter, please call	:
CINDY KE		515 956-4836
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is	s a \$35.00 check made payable to the Departme	nt of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

CR2E045 (03/12)

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

	provisions of sections 607.0502, 617.050		
•	nge is submitted for a corporation orga r to change its registered office or regist	i -	
	- P		• 11// P
1. The name of t	he corporation: TODD & SARGENT, INC	1. 14 COO'O	· · · · · · · · · · · · · · · · · · ·
2. The principal	office address: 2905 SE 5TH STREET, A	MES, IX 50010	
	4.5.100		
3. The mailing a	ddress (if different):	 	
4. Date of incorp	oration/qualification: 09/06/2016	Document number: F160000	003989
5. The name and	street address of the current registered a tment of State: (If resigned, enter resigned		vith the
	NRAI SERVICES, INC.		_
	1200 SOUTH PINE ISLAND ROAD		_
	PLANTATION, FL 33324		
6. The name and (if changed):	street address of the new registered age	nt (if changed) and /or registered of	ffice
	C T Corporation System		
	c/o C T Corporation System, 1200 South P	: ine Island Road	
	P.O. Box NOT	acceptable	•
	Plantation, Florida 33324		
The street address changed will	ss of its registered office and the street be identical.	address of the business office of it	ts registered agent,
Such change was authorized by the	s authorized by resolution duly adopted c board, or the corporation has been no	by its board of directors or by an tified in writing of the change.	officer so
Natale	l lickeus	Notalie Picker	September 1
I hereby accept if I further agree to performance of his agent, confirm to	the appointment as registered agent and o comply with the provisions of all state ny chiles, and I am familiar with and a s document is being filed merely to refl hat the corporation has been notified it	d agree to act in this capacity ues relative to the proper and con accept the obligation of my position act a change in the registered office writing of this change.	poliche Sons registered Sons registeres de la constant de la const
// cache	oration System	January 13, 2017	TO I
Sign	ature of Registered Agent Mationna		
It signing on beh	salf of an entity:	int Secretary	80 A
To	pod or Printed Name		
.,	+ + + FILING FE	E: \$35.00 * * *	~1
MA	Make citecks payable to Flo IIL to: Division of Corporations, P.	rida Department of State O. Box 6327, Tallahassee, FL 3	12314

CR2E045 (03/12)