F94000003777

	9 Goder Collins V City/State	questor's Name Nay Drive Address SD000286504 -05/06/990104 *****35.00 ** Office Use Only NAME(S) & DOCUMENT NUMBER(S), (if known):	16 7 !9-018 ***35.00
	1	poration Name) (Document #)	
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Musicari ^b vi	☐ Mail out [Pick up time Certified Copy Will wait Photocopy Certificate of Status	
	NEW FILINGS TO	AMENDMENTS Amendment Amendment	
	NonProfit	Resignation of R.A., Officer/ Director Change of Registered Agent	
	Limited Liability		
	Domestication	Dissolution/Withdrawal	
	Other	Merger	
# 1	OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	·
			·
CR2E03	1(1/95)	Examiner's Initials	

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

	e provisions of sections 607.0502, 617.0502, 607.150		
	d corporation organized under the laws of the State of _ lowing statement in order to change its registered offic		
the State of Flo			
1. The name of	f the corporation is: VRF Dents, Inc.	· · · · · · · · · · · · · · · · · · ·	<u>=</u>
2. The mailing	address of the corporation is: 9 Gateway Driv	ve, Collins	sville, IL 62234
3. Date of inco	orporation/qualification: 7/19/94 Docum	ment number:_	F94000003777
4. The name ar	nd address of the current registered agent and office:		.
	Victor Fears		<u> </u>
	7812 3rd Ave. So.		99 MAY
5. The name ar	St. Petersburg, FL 33707 nd address of the new registered agent and office: (P. O.	. Box Not Acce	ptable)
	Victor Fears		PA F. D
	6115 Pasadena Point Blvd.	· · · · · · · · · · · · · · · · · · ·	
	Gulfport, FL 33707		. <u> </u>
The street add agent, as chan	ress of its registered office and the street address of the ged, will be identical.	e business offic	ce of its registered
authorized by	and alain	of directors or $\frac{1}{2}$	by an officer so
(Signatur	e of an officer, chairman of vice chairman of the board)	(Da	nte)
	Nancy Rydgig, Secretary (Printed or typed name and title)	. 1. 2 2.	
Having been recorporation, la further agree performance or registered age	named as registered agent and to accept service of pro hereby accept the appointment as registered agent an e to comply with the provisions of all statutes relative to of my duties, and I am familiar with and accept the obl	cess for the ab ad agree to act to the proper a ligation of my p	ove stated in this capacity. nd complete position as
1/	/h	Vhalea	
	(Signature of Registered Agent)	(Date)	
If signing on beh	alf of an entity:	,	
	(Typed or Printed Name)	(Capacity)	
	* * * FILING FEE: \$35.00 * * *	• .	

CR2E045(7/97)