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.

(((H11000003913 3)))



H110000039133ABCS

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TO:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone fax Number : (850)878-5368

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 ROANOKE TRADE SERVICES, INC.

Cartificate of Status	0
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Help

COVER LETTER

TO: Amendment Division of	Section Corporations	
SUBJECT:_	Rognoke Trade	Services, Inc.
	Name o	f Corporation
DOCUMENT NUM	Ber:	F9400006671
The enclosed Stateme	ant of Change of Registered Of	fice/Agent and fee are submitted for filing.
Please return all corre	espondence concerning this ma	tter to the following:
•	Name of (Contact Person
~_		Company
	Luite	Company
-	A	ldross
• =	City/State	and Zip Code
	jcahalan@roa	NOKETRADE.COM
E.	mail address: (to be used for	future annual report notification)
For further information	concerning this matter, please	call:
		et ()
Name o	of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35,00 cl	neok made payable to the Depa	rtment of State.
	Mailing Address: Amendment Section	Street Address:
	Amendment Section Division of Corporations	Amendment Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahussee, FL 32314	2661 Executivo Conter Circle Tallahassee, FL 32301

CR2B045 (8/05)

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

statement of in	the provisions of sections 607 change is submitted for a cor order to change its registered	office or register	ed agent, or both, in the State	of Florida	
1. The name	e of the corporation: Koanoke T		Ç		
	ipal office address: WOODFIELD ROAD 500 SCH	AUMBURG IL 6	0173		_
3. The maili	ng address (if different):				_
4. Date of in	corporation/qualification:	12/29/94	Document number:	F94000006671	_
	and street address of the curre epartment of State: (If resigne			e with the	
	CORPORATION SERVICE	E COMPANY			
	1201 HAYS STREET TAI	Lahassee fl	32301		
				<u> </u>	
6. The name (if change	and street address of the new i	registered agent	(if changed) and /or registered	l office	- <
	C T Corporation System				
	c/c C T Corporation System	, 1200 South Pin	e Island Road		
		P.O. Box NOT at			
	Plantation, Florida 33324				
The street adeas changed w	dress of its registered office a	and the street ad	dress of the business office of	of its registered agent,	
Such change authorized by	was authorized by resolution the board, or the corporation	duly adopted b	y its board of directors or by ied in writing of the change.	an officer so	
			Kimberly Breunling, V		
	pare at wrattoer or presiden	\supset	Printed or typed nume a		
nercoy doce further agre of my duties, a locument is b corporation h	pt the appointment as registe e to comply with t he prev iction and I am familiar with and a eing filed merely to reflect a as been notified in writing of	rea agent and a ns of all statute. cept the obliga change in the re this change.	gree to act in this capacity, is relative to the proper and to the proper and tion of registion as registing the capacity and	complete performance ered agent. Or, if this reby confirm that the	
· ~~~\$`	Corporation System	H	01/04/2011		
	SECURITY OF REGISTERS Agent	<u> </u>	Dute		
signing on b	chalf of an entity:		,		
	Assistant Securiory				
	Rebecca Burth Typed 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 (8/05)