F95000003801

| (Requestor's Name) | | | | |
|---|-----|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT M | AIL | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status _ | | | | |
| Special Instructions to Filing Officer: | | | | |
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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

7/29/13

NAME:

FLORIDA SUBSTRATE INC

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION:

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

| 1. The name of the corporation: | LORIDA SUBSTRATE | EINC. | |
|--|--|---|----------------|
| 2. The principal office address: | | | |
| 2656 Electronics Way | West Palm Beach | FL | 3347 |
| 3. The mailing address (if different): | | | |
| 313 Cresent Street | Valdese | NC | 28690 |
| 4. Date of incorporation/qualification: August 7 | , 1995 Document number: | F950000 | 03801 |
| The name and street address of the current register Florida Department of State: (If resigned, enter res | | le with the | |
| CT Corpora | ation System | | |
| 1200 South Pi | ne Island Road | | P S |
| Plantation | , FL 33324 | | 至 |
| 6. The name and street address of the new registered (if changed): | agent (if changed) and /or registere | d office | SSEE S |
| National Corporate R | esearch, Ltd., Inc. | | OH, |
| 155 Office Plaza Driv | e | | 8 |
| Tallahassee, FL 323 | NOT acceptable 801 | | |
| The street address of its registered office and the stress changed will be identical. | reet address of the business office | of its register | red agent, |
| Such change was authorized by resolution duly adoption the board, or the corporation has been | | | |
| Australia of Sulpottices of attraction | Jeffrey S. Simm | ٥٠٠ , 5ec | retary |
| I hereby accept the appointment as registered agen I further agree to comply with the provisions of all i performance of my duites, and I am familiar with a agent. Or, if this document is being filed merely to hereby confirm that the corporation has been notific | t and agree to act in this capacity, statutes relative to the proper and nd accept the obligation of my pos reflect a change in the registered ed in writing of this change, | complete ltion as regis office addres | stored s,] |
| nevery confirm that the confirmation has need hirtigh | , , | ~ 1 | |
| Signature of Registered Agent | 7/29/201 | 15 | |

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

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 (722045 (03/12)