

F95000005515

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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.

(((H12000177547 3)))



H120001775473ABC1

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 : (850) 222-1092
Fax Number : (850) 878-5368

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

Email Address: _____

**REGISTERED AGENT CHANGE
NORIX GROUP, INC.**

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

2012 JUL -9 PM 2:25
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

2012 JUL -9 AM 8:02
RECEIVED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2012 JUL -9 AM 8:02

TO: SECRETARY OF STATE
SUFFICIENCY OF FILING

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

7/9/2012

OK
7/9/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NORIX GROUP, INC.
Name of Corporation

DOCUMENT NUMBER: F95000005515

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Janis Stacey

Name of Contact Person

Norix Group, Inc.

Firm/Company

1000 Atlantic Drive

Address

West Chicago, IL 60185

City/State and Zip Code

jstacey@norix.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janis Stacey

at 630 231-1331

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Illinois in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NORIX GROUP, INC.
2. The principal office address: 1000 Atlantic Drive, West Chicago, IL 60185
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/13/1995 Document number: F95000005515

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RICHARD B. KARL

4051 GULF SHORE BLVD N, UNIT 302

NAPLES FL 34103 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road Plantation,

P.O. Box NOT acceptable

Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Janis Stacey
Signature of an officer or director

Janis Stacey - Vice President- Administration

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: Katey Judy
Signature of Registered Agent

By:

Katey Judy
Signature of Registered Agent

Assistant Secretary of C T Corporation System

Date: 07/09/2012

If signing on behalf of an entity:

CT Corporation System
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

CR2E043 (03/12)