

F9700000a627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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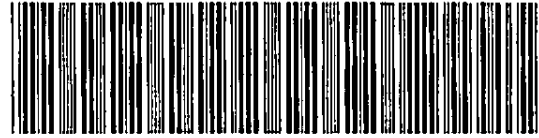
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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TO: Amendment Section
Division of Corporations

SUBJECT: Otto - Meyer, Inc.
Name of Corporation

DOCUMENT NUMBER: F97000002627

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:

Angie Davis

Name of Contact Person

Otto-Meyer, Inc.

Firm/Company

2449 E. Main Street

Address

Greenwood, IN 46143

City/State and Zip Code

adavis@ottospm.com

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

For further information concerning this matter, please call:

Angie Davis

Name of Contact Person

at

(317) 534-4563

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

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 Indiana in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Otto-Meyer, Inc.
2. The principal office address: 2449 E. Main Street, Greenwood, IN 46143
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/19/1997 Document number: F97000002627
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)

Jerry Brooks
613 Terranova Drive
Winter Haven, FL 33884

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

Jim Vester
3504 Celestial Way
P.O. Box NOT acceptable
N. Ft. Meyers, FL 33903

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.

[Signature]
Signature of an officer or director

Steve Sawa, General Manager
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.

Jim Vester
Signature of Registered Agent

Sep. 30 - 2017
Date

If signing on behalf of an entity:

JIM VESTER
Typed or Printed Name

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