

F98000003072

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DIVISION OF CORPORATIONS

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 766320 4304487

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 35.00

ORDER DATE : June 21, 2004

ORDER TIME : 10:56 AM

ORDER NO. : 766320-160

CUSTOMER NO: 4304487

CUSTOMER: Ms. Nancy Johnson
Mcguirewoods Llp
Suite 2500
150 North Michigan Avenue
Chicago, IL 60601

CHANGE OF AGENT

NAME: SAI SOUTHEAST COMMAND CENTER, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight EX 1156

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

1. The name of the corporation: SAI SOUTHEAST COMMAND CENTER, INC.
2. The principal office address: 2101 S. Arlington Heights Road
Suite 150, Arlington Heights, IL 60005
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/29/1998 Document number: F98000003072

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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

Corporation Service Company

1201 Hays Street

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32301

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 of an officer or director)

Maureen Cullen, Attorney in Fact
(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.

Corporation Service Company

By: 

(Signature of Registered Agent)

June 18, 2004

(Date)

If signing on behalf of an entity:

Jennifer A. Geldof

(Typed or Printed Name)

Asst. Vice President

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FL 32301