

C 34540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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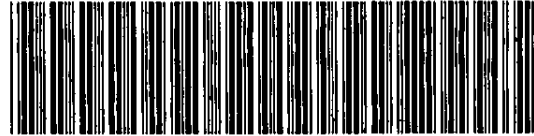
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 26 2016
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HYCHEM, INC.

Name of Corporation

DOCUMENT NUMBER: G34540

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:

Carol Glospie

Name of Contact Person

NewCo Corporate Services, Inc.

Firm/Company

274 Madison Avenue, Suite 801

Address

New York, NY 10016

City/State and Zip Code

cgannon@snfhc.com

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

For further information concerning this matter, please call:

Carol Glospie

212

356-8349

at ()

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

1. The name of the corporation: HYCHEM, INC.
2. The principal office address: 10014 N. Dale Mabry Hwy
Suite 213, Tampa, FL 33618
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/31/1983 Document number: G34540
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)

James A. Hauser

3191 Coral Way, Suite 626

Miami, FL 33145

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

NRAI Services, Inc.

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, 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.

[Signature]
Signature of an officer or director

James R. Carlson Vice President
Printed or typed name and title

James R. Carlson

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: NRAI Services, Inc.

Carol Glospe
Signature of Registered Agent

April 21 2016
Date

If signing on behalf of an entity:

Carol Glospe

Typed or Printed Name

Assistant Secretary

*** 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 (03/12)