

J44672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

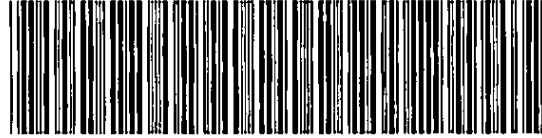
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 26 2018  
C. MCNAIR



CSC - WILMINGTON  
251 Little Falls Drive  
Wilmington De 19808

800-927-9800  
302-636-5454 FAX

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: December 14, 2018

Order#: 542857/010

Re: LYONS THORNTON, INCORPORATED

Enclosed please find:

XX Change of Registered Agent and Office.  
XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.  
XX Issue Proof of Filing.  
XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper  
c/o Corporation Service Company  
251 Little Falls Drive  
Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

**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: LYONS THORNTON, INCORPORATED
2. The principal office address: 3010 Saddle Creek Road, Lakeland, FL 33801
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/02/1986 Document number: J44672
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)

Thomas B. Putnam, Jr.

199 Avenue B, NW, Suite 200

Winter Haven, FL 33881

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 NOT acceptable

Tallahassee

FL 32301

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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

Thomas D Lyons

President, Director

\_\_\_\_\_  
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

12/14/2018

\_\_\_\_\_  
Date

If signing on behalf of an entity:

Ami M. Casper, Asst. Vice President

\_\_\_\_\_  
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

CR2E045 (03/12)