(R	equestor's Name)	
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, (C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status

L. SELLERS MAR 31 2010

EXAMINER

Office Use Only



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03/30/10--01023--011 **25.00

To: FL Corporation Division.

Re: LITHO OF FLORIDA, LLC

Enclosed please find one Statement of Change form and a check for \$25.00 for the filing fee.

If there are any questions regarding this filing please call Lara Kleinheinz at 1-866-924-9247 ext. 225

Please return all completed documents to:

CTProComply
Attn: Filing Department
8040 Excelsior Drive, Suite 200
Madison, WI 53717

Best Regards,

Filing Department CTProComply

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: LITHO OF AME	ERICA, LLC	
2. (a) Principal office address of limited liability company	y: 3637 East I240 Service Rd.	
(Note: MUST BE STREET ADDRESS)	Oklahoma City, Oklahoma 73135	
(b) Mailing address of limited liability company:	3637 East I240 Service Rd.	
(Note: MAY BE POST OFFICE BOX)	Oklahoma City, Oklahoma 73135	
12/14/2002	L02000034285	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	RONALD R FIELDSTONE	
Registered Office Address:	201 ALHAMBRA CIRCLE CORAL GABLES/FL/33134	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
NEW Registered Agent:	C T Corporation System	
NEW Registered Office Address:	1200 South Pine Island Road,	
MUST BE FLORIDA STREET ADDRESS)	Plantation ,FL33324	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	lorida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote rwise provided in the articles of organization	
Barry Hawley, Member	_	
Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office y has been notified in writing of his change.	
Mahl dagent Mark Williams, AVP CT Corporat	F-G	
Division of Corporations, P.O. Box 63 FILING FEE: \$	327, Tallahassee, FL 32314 SAR \\ \(\omega \rightarrow \) \(\omega	
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