

1000000000251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100262747111

RA  
Change

07/31/14--01013--019 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 JUL 31 PM 2:19

FILED

DR  
8/12/14

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

*Pursuant to the provisions of sections 605.0114 or 605.0116, 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: FISHER HAMILTON L.L.C.

2. (a) 1716 LAWRENCE DRIVE, Suite 1

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

DE PERE

WI 54115

(b) \_\_\_\_\_

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

02/08/2000

3. Date of filing/registration in Florida

M00000000251

4. Document number

5. (a) CAPITOL CORPORATE SERVICES, INC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

155 OFFICE PLAZA DR. STE A

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

TALLAHASSEE

, FL 32301

(b) Corporation Service Company

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street

NEW Registered Office Address:

Tallahassee

, FL 32301

FILED  
2014 JUL 31 PM 2:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

Dona Priebe, Authorized Person

Printed or typed name of signee

*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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature]  
Signature of Registered Agent

Corporation Service Company

BY: Grace E. Kirby, Assistant Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00