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(R	equestor's Name)		
. (A	ddress)		
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(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Name)		
U)	ocument Number)		
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
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JAN - 5 2012

EXAMINER



700215096447

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ACCOUNT NO. : I2000000195

REFERENCE :

7862039

AUTHORIZATION 🕡

COST LIMIT

ORDER DATE: December 27, 2011

ORDER TIME : 9:41 AM

ORDER NO. : 039059-032

CUSTOMER NO: 7862039

CHANGE OF AGENT

NAME: ESSIG CO., LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ___ PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:



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, by both, in the State of Florida.

1. Nan	ne of the limited liability company: _ESSIG CO., L	LC Yau Ni		
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	r: 1117 Snyder Road West Lawn, PA 19609		
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1117 Snyder Road West Lawn, PA 19609		
	a 15, 2000	M0000000496		
3. Date	e 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:	NRAI Services, Inc.		
	Registered Office Address:	515E. Park Avenue Tallahassee, FL 32301		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	NEW Registered Agent:	Corporation Service Company		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street			
		Tallahassee ,FL 32301		
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. (Signalure of a member or authorized representative of a member)				
Maurec (Printed o	en Cathell, Authorized Person or typed name of signee)	-		
// //	y accept the appointment as registered agent and a with the provisions of all statutes relative to the pro- iliar with and accept the obligations of my position r, if this document is being filed to merely reflect a c that the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.		
By: X (Signature	c of Registered Agent) Corporation Service Company	Grace E. Kirby, Asst. VP		
	Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314			

FILING FEE: \$25.00