

16200008019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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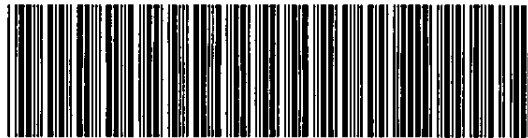
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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Dec. 17. 2015 9:06AM KRIZ-DAVIS

No. 3340 P. 1

**COVER LETTER****TO:** Amendment Section  
Division of Corporations**SUBJECT:** North American Association of Utility Distributors, Inc.  
Name of Corporation**DOCUMENT NUMBER:** N02000008019

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:

Jamie S. Hampy

Name of Contact Person

Duggan, Joiner, & Co., CPAs

Firm/Company

334 NW 3rd Ave.

Address

Ocala, FL 34475

City/State and Zip Code

director@naaud.org

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

For further information concerning this matter, please call:

Mary Jane Reinhardt

Name of Contact Person

at ( 314 ) 541-6167

Area Code &amp; 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**received**  
BC 12-17 10:01a

**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: North American Association of Utility Distributors, Inc.
2. The principal office address: 334 NW 3rd Ave., Ocala, FL 34475
3. The mailing address (if different): 3105 Corporate Exchange Court, Bridgeton, MO 63044
4. Date of incorporation/qualification: 10/18/2002 Document number: N02000008019
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)

COKER, LINDA B

3025 SANDY LANE

THE VILLAGES, FL 32162

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

Duggan, Joiner, & Co., CPAs

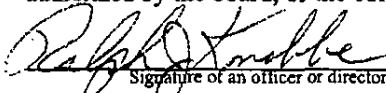
334 NW 3rd Ave.

P.O. Box NOT acceptable

Ocala, FL 34475

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

Ralph Knobbe, President NAAUD

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.*

  
Signature of Registered Agent

12/24/15  
Date

If signing on behalf of an entity:

Duggan, Joiner & Co., CPAs

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)

FILED  
15 DEC 28 AM 8:15  
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TALLAHASSEE, FLORIDA