

N47737

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000137925 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)205-0380

From: Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

RECEIVED

06 MAY 18 AM 8:00

DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

SOUTHERN PINE INSPECTION BUREAU

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$87.50

SECRETARY OF STATE
TALLAHASSEE FLORIDA

06 MAY 18 AM 10:34

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 18 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Southern Pine Inspection Bureau
(Name of corporation)

DOCUMENT NUMBER: N47737

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:

Brittani Phelps
(Name of contact person)

Business Filings Incorporated
(Firm/Company)

8025 Excelsior Dr., Ste. 200
(Address)

Madison, WI 53717
(City/state and zip code)

For further information concerning this matter, please call:

Brittani Phelps at (800) 981-7183 ext. 269
(Name of contact person) (Area code & 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
409 E. Gaines Street
Tallahassee, FL 32399

A060001374203

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: Southern Pine Inspection Bureau
2. The principal office address: 4709 Scenic Highway, Pensacola, Florida 32504-9018
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/09/1992 Document number: N47737
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Corporation Service Company

1201 Hays Street

Tallahassee, Florida 32301-2525

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

Business Filings Incorporated

1203 Governors Square Blvd, Suite 101

(P.O. Box NOT acceptable)

Tallahassee, Florida 32301-2960

FILED
06 MAY 18 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

James E. Loy
(Signature of an officer or director)

James E. Loy, President
(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.

M. Schiff
(Signature of Registered Agent)

May 12, 2006

(Date)

If signing on behalf of an entity:

Mark Schiff, AVP, Business Filings Incorporated
(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