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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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R. WHITE

Division of Corporations

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REGISTERED AGENT CHANGE C.N. BAILEY AND COMPANY, INC.

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Fax Audit: H140002951533

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation org	2502, 607.1508, or 617.1508, Florida Stat ganized under the laws of the State of <mark>Alab</mark>	ema	s		
		istered agent, or both, in the State of Flor	rida.			
1. The name of	the corporation: C.N. Bailey and Compa	ny, Inc.		<u>.</u>		_
2. The principa	l office address: 211 Kilsby Circle, Besse	emer, Alabama 35022				-
3. The mailing						-
4. Date of incom	rporation/qualification: 12/6/1983	Document number: P00151				- -
	d street address of the current registere atment of State: (If resigned, enter resigned.	d agent and registered office on file with a gued)	the			
	CT CORPORATION SYSTEM					
	1200 S. PINE ISLAND ROAD					
	PLANTATION, FL 33324			i¦.c.	7	
6. The name an (if changed):		gent (if changed) and for registered office	EHOLA		330	
	Business Filings Incorporated		1		23	rin
	515 E. Park Avenue		i Ç			
		OT acceptable	ā,	0, 5	ڢ	
	Tallahassee, Florida 32301			57	2	
The street adde as changed wil	ress of its registered office and the stre I be identical.	eet address of the business office of its re	gistered	l agent	P Les	
Such change wanthorized by	as authorized by resolution duly adop the board, or the corporation has been	ted by its board of directors or by an offi notified in writing of the change.	icer so			
SV SUBARI	the of an other or director	C.N. Bailey, President Printed or typed name and title				
I hereby accep I further agree performatice o agent. Cr. if d hereby confirm	r the appointment as registered agent to comply with the provisions of all si fun duties, and I am fauthiar with am his document is being filed merely to r that the corporation has been notified	and agree to act in this capacity latines relative to the proper and comple d accept the obligation of my position as effect a change in the registered office a d in writing of this change.	ete vegister ddress, .	red I		
Nall		15th day of December, 2014				
Şi	gnature of Registered Agent	Date				
If signing on b	ehalf of an entity:					
Mark Williams,						
· · · · · · · · · · · · · · · · · · ·	Typed or Printed Name	CEE. 672 00 * * *				
		FEE: \$35.00 * * * CORIDA DEPARTMENT OF STATE				
T.		PO Boy 6377 TALLARAGGE EL 3731	1.1			

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