Division of Corporations **Electronic Filing Cover Sheet** 

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tor.

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007

: (702)866-2500

Fax Number

: (702)866-2689

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## REGISTERED AGENT CHANGE J.L. FILBEY & SONS, INC.

Certificate of Status	0
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SEP 1 7 2012

T. ROBERTS

9/17/2012

TO:

Amendment Section

## **COVER LETTER**

Division	of Corporations	
SUBJECT:	J. L. Filbey & Sons	s. Inc.
	Name of Corp	oration
DOCUMENT N	UMBER: P07000100130	
The enclosed Sta	tement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all	correspondence concerning this matter to	the following:
	Josie Sore Name of Contac	nsen
	Name of Contac	t Person
	InCorp Servic	
	Firm/Comp	any
	2360 Corporate Circ	le · Suite 400
	Address	
	Henderson, NV 8	9074-7722
	City/State and 2	ip Code
	E-mail address: (to be used for future	re annual report notification)
For further inform	mation concerning this matter, please call	:
Josle Sorense N	n on behalf of Incorp Services, Inc.s ame of Contact Person	at (702 ) 866-2500 Area Code & Daytime Telephone Number
Enclosed is a \$35	5.00 check made payable to the Departme	nt of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

CR2E045 (03/12)

Tallahassee, FL 32301

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

statement of change is submitted for a corpora	ation organized under the laws of the State of Florida  ce or registered agent, or both, in the State of Florida.	
1. The name of the corporation: J. L. Filbey	& Sons, Inc.	
2. The principal office address:		
3. The mailing address (if different):	6, CHICAGO, IL 60605 US	
4. Date of incorporation/qualification: 09/07	7/2007 Document number: P07000100130	
5. The name and street address of the current Florida Department of State: (If resigned, e	registered agent and registered office on file with the	
WESTMORELAND, KE		
3215 Ne 184Th Street		
North Miami Beach, FL	33160	
6. The name and street address of the new reg (if changed):	istered agent (if changed) and /or registered office	
InCorp Services, Inc.	بن الم	
17888 67th Court North		
Loxahatchee, FL 33470	P.O. Bax NOT acceptable	
The street address of its registered office and as changed will be identical.	d the street address of the business office of its registered agent,	
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 L Filbey/President	
nenformance of my duties, and I am familiar	s of an statutes retative to the proper and complete - with and accept the obligation of my position as registered - with and accept the complete of the registered office address, I	
Styllausen	September 13, 2012	
If signing on behalf of an entity:	Date	
Josie A Sorensen on behalf of Inco	orp Services, Inc.	

\* \* \* 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)

Typed or Printed Name

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