

PI3000098655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

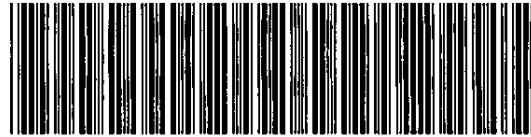
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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PA  
Change

06/19/14--01004--U13 \*\*35.00

FILED  
2014 JUL 28 AM 11:05  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

ASR  
7/29/14

\*00789 00611 00671



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 7, 2014

Contemporary Business Services  
4070 Herschel Street, Suite 3  
Jacksonville, FL 32210

SUBJECT: GB FABRICATION, INC.  
Ref. Number: P13000098655

We have received your document for GB FABRICATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 914A00014578

*Attached*

RECEIVED  
14 JUL 28 PM 3:33  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GB Fabrication, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P13000098655

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:

Name of Contact Person  
**Contemporary Business Services**  
Firm/Company  
**4070 Herschel Street, Suite 3**  
Address  
**Jacksonville, Florida 32210**  
City/State and Zip Code  
**gb.fab@hotmail.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Patricia M. Bigos** at ( **904** ) **710-0772**  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: GB Fabrication, Inc  
2. The principal office address: 45745 CR 15 Fort Collins, Colorado 80524

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 01/01/2014 Document number: P13000098655

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)

Registered Agent Solutions, Inc

1701 Directors Blvd, Suite 300

Austin, Tx 78744

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

Contemporary Business Services

4070 Herschel Street, Suite 3

P.O. Box NOT acceptable

Jacksonville, Florida 32210

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.

Patricia M. Bigos  
Signature of an officer or director

Patricia M. Bigos Secretary

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]  
Signature of Registered Agent

06/06/2014

Date

If signing on behalf of an entity:

Contemporary Business Service

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

FILED  
2014 JUL 28 AM 11:05  
TALLAHASSEE, FLORIDA