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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: Leo A Daly, Formerly STH Architectural Group, Inc.
2. The principal office address: 1400 Centrepark Blvd, Suite 500
West Palm Beach, FL 33401
3. The mailing address (if different): 8600 Indian Hills Drive Omaha, NE 68114
4. Date of incorporation/qualification: 9/30/1996 Document number: P96000081958
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)
Corporation Service Company
1201 Hays Street, Suite 105
Tallahassee, FL 32301
Tallahassee, FL 32301 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
NRAI Services, Inc.
515 East Falk Avenue
1.6. Don to acceptable
Tallahassee, FL 32301
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 William A. Hanser, 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.
Signature of Registered Agent Date
If signing on behalf of an entity:
Joelle Churik, Assistant Secretary Typed or Printed Name

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *