

P970004257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

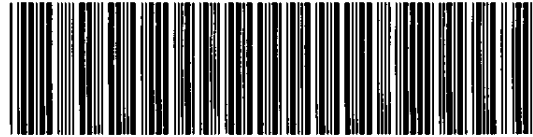
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 SEP -6 AM 9:21
RECEIVED
TALLAHASSEE, FLORIDA

taylor | english

Email: jgarrison@taylorenghish.com
Phone: 678-336-7254

September 5, 2012

VIA FEDERAL EXPRESS

Florida Secretary of State
Division of Corporations – Amendment Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Statement of Change – CommStructures, Inc.

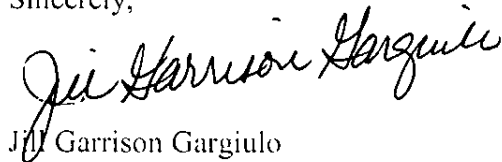
Dear Sir or Madam:

Enclosed are the following in connection with the above referenced entity:

1. Cover Letter;
2. Statement of Change; and
3. Check for \$35.00 for the fee.

Please file, date stamp the enclosed copy of this letter and return in the provided self-addressed and postage prepaid stamped envelope.

Sincerely,



Jill Garrison Gargiulo
Paralegal

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CommStructures, Inc.

Name of Corporation

DOCUMENT NUMBER: P97000042517

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:

Jonathan B. Wilson, Esq.

Name of Contact Person

Taylor English Duma LLP

Firm/Company

1600 Parkwood Circle SE, Suite 400

Address

Atlanta, GA 30339

City/State and Zip Code

jwilson@taylorenghish.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jill Garrison Gargiulo

Name of Contact Person

at (678) 336-7254

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: CommStructures, Inc.
2. The principal office address: 101 E. Roberts Road, Pensacola, FL 32534
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/09/1997 Document number: P97000042517

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)

Edsel F. Matthews, Jr.

308 S. Jefferson St.

Pensacola, FL 32501

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

CT Corporation System

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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

James B. Hobbs 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.

 Terence Hardley Asst. Secretary
Signature of Registered Agent

5/2012
Date

If signing on behalf of an entity:

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
CR2E045 (03/12)