## P9700055109

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Prestige Aluminum Rail, Inc.

Name of Corporation

DOCUMENT NUMBER: <u>P97000055109</u>

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:

Michael L. Cribby

Name of Contact Person

Prestige Aluminum Rail, Inc.

Firm/Company

P.O. Box 366

Address

Starke, FI 32091

City/State and Zip Code

par@atlantic.net

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

For further information concerning this matter, please call:

Michael L. Cribby

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rto change its registered office or registered agent, or both, in the State of Florida.
1 The name of 1	he corporation: Prestige Aluminum Rail, Inc.
2. The principal	4770 O.E. 440m d Mari
	Starke, FI 32091
3. The mailing a	ddress (if different): P.O. Box 366
	Starke, Fl 32091
4. Date of incorp	poration/qualification: 06/20/1997 Document number: P97000055109
5. The name and	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	(RESIGNED) FRISBEE, JAMES R (Title V)
	417 E. WELDON ST.
	STARKE, FL 32091
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	CRIBBY, MICHAEL L.
	4778 SE 142nd Way
	Starke, Fl 32091  P.O. Box NOT acceptable  Starke, Fl 32091
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
AND 8	re of an officer or director  Printed or typed name and title
I hereby accept I further agree t performance of	the appointment as registered agent and agree to act in this capacity, o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
MAPA.	ature Vi Registered Agent Date
If signing on be	half of an entity:
Т	ped 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 \* \* \*