P9800051670

, (Re	questor's Name)				
. (Add	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone				
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Mcdow alex.mcdow@cscglobal.com

Date: March 16, 2016

Order#: 047944/001

Re: ACORN STAIRLIFTS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Alex Mcdow c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

statement of cha	provisions of sections 607.0302, 61 inge is submitted for a corporation r to change its registered office or i	organized under the laws of t	the State of	f Florida	
1. The name of t	he corporation: ACORN STAIRLIF	TS, INC.			
2. The principal 7001 LAKE I	office address:	32809			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 06/08/1998	Document number	er: P98000	0051670	
	street address of the current register tment of State: (If resigned, enter re		ce on file	with the	
	NATIONAL CORPORATE RESEA	ARCH,LTD.,INC.		_	
	115 NORTH CALHOUN ST.		141	2016	
	Tallahassee	FL 3230	1 28		
6. The name and street address of the new registered agent (if changed) and /or registered of clif changed):					
	Corporation Service Company		STA	_ ?>	
	1201 Hays Street		P m	32	
P.O. Box NOT acceptable					
	Tallahassee	FL 3230)1 	_	
The street addre as changed will	ess of its registered office and the sbe identical.	street address of the business	office of	its registered agent,	
Such change wa authorized by th	s authorized by resolution duly ad e board, or the corporation has be	opted by its board of directo en notified in writing of the	ors or by an change.	ı officer so	
	CONECT OF DIRECTOR		ed name and t	Vice President	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered age to comply with the provisions of all my duties, and I am familiar with a document is being filed merely to that the corporation has been noting Service Company	nt and agree to act in this co	anacity		
By: Dra	ro Cokuble	03/09/2016			
Sigr	nature of Registered Agent	Ī	Date		
If signing on bel	half of an entity:				
Grace E. Kirby,	Asst. Vice President				
Ту	ped or Printed Name				

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