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## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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(((H150002518063)))



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To:

Division of Corporations

Fax Number : (850)617-6380

OCT 22 2015

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)205-8842

Fax Number : (850)878-5368

WHITE ter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## REGISTERED AGENT CHANGE COMMERCIAL INSULATING GLASS COMPANY

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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Corporate Filing Menu

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## **COVER LETTER**

TO: Amond Division	ment Section n of Corporations	
SUBJECT: Con	mmercial Insulating Glass Company	
BOBGECT	Name of Corp	oration
DOCUMENT	NUMBER:	
The enclosed S	tatement of Change of Registered Office/A	•
Please return al	l correspondence concerning this matter to	the following:
	Kathloon Ramsoy	
	Name of Contac	et Person
	Hussmann Corporation	
,	Firm/Comp	any
	12999 St. Charles Rock Road	•
	Address	
		•
	Bridgeton, MO 63044	
	City/State and 2	ip Code
	kathloon.ramsoy@hussmann.com	
	B-mail address: (to be used for futu	re annual report notification)
For further info	rmation concerning this matter, please call	:
	Name of Contact Person	at (
Enclosed is a \$3	35.00 check made payable to the Departme	nt of State.
	Malling Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, PL 32314	2661 Executive Center Cirole Tallabassee, FL 32301

CR2E045 (03/12)

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

	rder to change its registered office or registered agent, or both, in the State of Florid	ta:		
1. The name of the corporation: Commercial Insulating Glass Company  2. The principal office address: 12999 St. Charles Rock Road; Bridgette MO6304				
3. The mailin	ig address (if different):			
4. Date of in	corporation/qualification: 11/08/1990 Document number: 911936			
	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	c		
	Joffrey Winster			
	1155 Porter Rd.	· ·		
	Sarasota, FL 34240		15 Q	
6. The name	and street address of the new registered agent (if changed) and /or registered office		00T 21	
•	C T Corporation System	<u>- 1</u>		
	c/o C T Corporation System, 1200 South Pine Island Road		δ; <u>5</u>	
	P.O. Box NOT acceptable Plantation, Florida 33324		7	
The street ad	dress of its registered office and the street address of the business office of its regi	stered ag	ent,	
Such change authorized by	was authorized by resolution duly adopted by its board of directors or by an office the board, of the corporation has been notified in writing of the change.	er. 90		
7	Eiken Setito Socretory		_	
I hereby according to the serior mance agent. Or, if hereby confine	ept the appointment as registered agent and agree to act in this capacity, see to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as results document to being filed merely to reflect a change in the registered office adam that the corporation has been notified in writing of this change.  Corporation System  Cristie Myers			
If signing on	behalf of an entity:		_	
	pration System			

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

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahasseb, FL 32314
CR2B045 (03/12)