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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
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RE-SUBMIT

Place of Submission 8/14

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

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**REGISTERED AGENT CHANGE
AAPCO SOUTHEAST, INC.**

Certificate of Status	0
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August 17, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AAPCO SOUTHEAST, INC.
506 WEBB ROAD
CONCORD, NC 28025

SUBJECT: AAPCO SOUTHEAST, INC.
REF: F01000004360

RE-SUBMIT

Please return original filing
date of submission 8/14

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

This is a corporate filing not a LLC filing.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

FAX Aud. #: H15000197026
Letter Number: 015A00017311

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 North Carolina _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: AAPCO SOUTHEAST, INC.
- 2. The principal office address: 506 WEBB ROAD CONCORD, NC 28025
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 08/16/2001 Document number: F01000004360

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
TALLAHASSEE, FL 32301-2525

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

CT Corporation System
c/o CT Corporation System, 1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation, Florida 33324

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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

Thomas Anderson, Vice 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.

By: CT Corporation System


 Signature of Registered Agent

August 14, 2015

 Date

If signing on behalf of an entity:

Terence Hardley, Assistant Secretary

 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)