

F9700000a627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

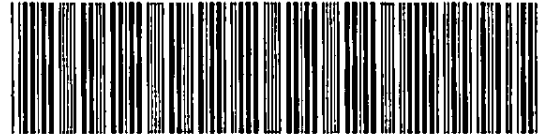
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300304130303

10/10/17--01007--002 \*\*35.00

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

OCT 10 P 12:21

FILED

OCT 10 2017

FILED

*Handwritten signature*

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Otto - Meyer, Inc.  
Name of Corporation

DOCUMENT NUMBER: F97000002627

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:

Angie Davis

Name of Contact Person

Otto-Meyer, Inc.

Firm/Company

2449 E. Main Street

Address

Greenwood, IN 46143

City/State and Zip Code

adavis@ottospm.com

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

For further information concerning this matter, please call:

Angie Davis

Name of Contact Person

at

(317) 534-4563

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

1. The name of the corporation: Otto-Meyer, Inc.
2. The principal office address: 2449 E. Main Street, Greenwood, IN 46143
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5/19/1997 Document number: F97000002627
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)

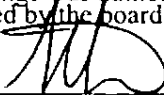
Jerry Brooks  
613 Terranova Drive  
Winter Haven, FL 33884

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

Jim Vester  
3504 Celestial Way  
P.O. Box NOT acceptable  
N. Ft. Meyers, FL 33903

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

Steve Sawa, General Manager  
\_\_\_\_\_  
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.

Jim Vester  
\_\_\_\_\_  
Signature of Registered Agent

Sep. 30 - 2017  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

JIM VESTER  
\_\_\_\_\_  
Typed or Printed Name

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