

6/12/2017

Division of Corporations

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC  
Account Number : I20100000062  
Phone : (888)705-7274  
Fax Number : (888)706-7274

\*\*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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE  
MASSMAN CONSTRUCTION CO

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$35.00

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MASSMAN CONSTRUCTION CO.  
Name of Corporation

**DOCUMENT NUMBER:** 810031

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:

MARGOT MULLIN  
Name of Contact Person  
Registered Agent Solutions, Inc.  
Firm/Company  
1701 Directors Blvd, Ste 300  
Address  
Austin, TX 78744  
City/State and Zip Code  
notices@rasi.com  
E-mail address: (to be used for future annual report notification)

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DIVISION OF CORPORATIONS  
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For further information concerning this matter, please call:

MARGOT MULLIN at (888) 705-7274  
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**

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

- 1. The name of the corporation: MASSMAN CONSTRUCTION CO.
- 2. The principal office address: 4400 W. 109TH STREET SUITE 300  
OVERLAND PARK KS 66211
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 10/08/1954 Document number: 810031
- 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

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

Registered Agent Solutions, Inc.  
155 Office Plaza Dr., Suite A  
P.O. Box NOT acceptable  
Tallahassee, FL 32301

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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

JOSEPH T. KOPP 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.*

  
 \_\_\_\_\_  
Signature of Registered Agent

06/07/2017  
 \_\_\_\_\_  
Date

If signing on behalf of an entity:  
Justine Karnell - Assistant Secretary  
 \_\_\_\_\_  
Typed or Printed Name

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