## FU100000 2616

| (Re                                     | equestor's Name)     | <del></del> |  |
|---|----------------------|-------------|--|
| (Ac                                     | ddress)              |             |  |
| (Ac                                     | ddress)              |             |  |
| (Ci                                     | ty/State/Zip/Phone # | )           |  |
| PICK-UP                                 | WAIT                 | MAIL        |  |
| (Bu                                     | usiness Entity Name) | _           |  |
| (Document Number)                       |                      |             |  |
| Certified Copies                        | _ Certificates of    | Status      |  |
| Special Instructions to Filing Officer: |                      |             |  |
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Office Use Only



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01/25/19--01020--009 \*\*35.00



CSC - WILMINGTON
251 Little Falls Drive,
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: January 23, 2019

Order#: 576419-003

Re: ADAMS CONSULTING ENGINEERS, 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 Please return evidence to the following:

Attn: Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

QUCA.XCOA

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

| statement of cha  | nge is submitted for a corporation organ   | 12, 607.1508, or 617.1508, Florida Statutes, the state of TEXAS   | his<br>——   |
|---|--|---|-------------|
|   |  | ered agent, or both, in the State of Florida.   |             |
| 1. The name of t  | he corporation: ADAMS CONSULTING   | ENGINEERS, INC.   |             |
| 2. The principal  | office address: 8951 CYPRESS WATER   | R BLVD, STE 150, DALLAS, TX 75019   |             |
| 3. The mailing a  | ddress (if different): P.O. BOX 131599,  | TYLER, TX 75713-1599  |             |
| 4. Date of incorp   | oration/qualification: 05/16/2007  | Document number: F07000002616   |             |
|   | street address of the current registered a<br>tment of State: (If resigned, enter resigne  | agent and registered office on file with the ed)  |             |
|   | Registered Agent Solutions, Inc.   |   |             |
|   | 155 Office Plaza Dr., Suite A  |   |             |
|   | Tallahassee, FL 32301  | PH  | 2019_JAN_25 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |  |   | 5 AM 10: 3  |
|   | Corporation Service Company  |   |             |
|   | 1201 Hays Street   |   |             |
|   | P.O Box NOI  | acceptable  |             |
|   | Tallahassee  | FL 32301  |             |
| The street addregas changed will  | ss of its registered office and the street<br>be identical.  | address of the business office of its registere   | ed agent.   |
| Such change was<br>authorized by the  | s authorized by resolution duly adopted<br>e board, or the corporation has been no   | by its board of directors or by an officer so tified in writing of the change.  |             |
| Xi  | e E agni   | Jill Cilmi, Vice President  |             |
| I further agree to<br>performance of t<br>agent. Or, if thi.<br>hereby confirm t                                | the appointment as registered agent and comply with the provisions of all stations with the provisions of all stations duties, and I am familiar with and a state document is being filed merely to reflect the corporation has been notified in Service Company | utes relative to the proper and complete<br>occept the obligation of my position as regist<br>ect a change in the registered office address | ered<br>, I |
| By: Sign  | ature of Registered Agent  | 01/23/2019<br>Date  |             |
| If signing on beh   | nalf of an entity:   |   |             |
| Grace E. Kirby,   | Asst. Vice President   |   | 1           |
| Ty  | ped or Printed Name  |   |             |
|   | * * * FILING FE  | E: \$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)