F110000014868

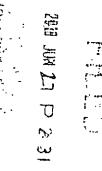
| (Re | questor's Name) | | | | |
|---|-------------------|-----------|--|--|--|
| (Address) | | | | | |
| (Ad | dress) | | | | |
| (Cit | y/State/Zip/Phone | #) | | | |
| PICK-UP | WAIT | MAIL | | | |
| (Bu | siness Entity Nam | ne) | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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96/27/19--01961--001 **55.86



CCC _ 2 MAP



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: June 11, 2019

Order#: 772271-007

Re: BUEHNER CONSTRUCTION, 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.

<u>XX</u> Please return evidence to the following:

Attn: Soraya Sariaslani 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 ch | ange is submitted fo | ns 607.0502, 617.05 r a corporation orga stered office or regis | mized under | the laws of | f the State | e of UT |
|---|---|--|--|-----------------------|----------------------------------|-------------------------|
| | | EHNER CONSTRU | | | The State | ' Of Florida. |
| 2. The principa | office address: | | | | | |
| | | E CITY UT 84115 | | | | |
| 3. The mailing a | nddress (if different) | : | | | - , | |
| 4. Date of incor | poration/qualificatio | n: 12/05/2011 | Docu | ment numb | er: <u>F110</u> | 00004868 |
| 5. The name and | I street address of th | e current registered a esigned, enter resign | agent and res | | | |
| | NRAI SERVICES I | NC. | | | | |
| | 1200 SOUTH PINE | ISLAND ROAD | | | | |
| | Plantation | | | FL 3333 | 24 | AMAN AN |
| 6. The name and (if changed): | street address of the | e new registered age | nt (if change | d) and /or i | registered | |
| | Corporation Servic | e Company | | | | A |
| | 1201 Hays Street | | | | î . | |
| | Tallahassee | PO Box NOT | seceptable | FL 3230 |)1 . | |
| The street addre as changed will | ss of its registered of be identical. | office and the street | address of th | ne business | office o | f its registered agent. |
| Such change wa authorized by th | s authorized by resc e board, or the corp | dution duly adopted oration has been not | by its board tified in writ | of directoring of the | ors or by a | an officer so |
| $-\infty$ | e of an ulficer or director | 2nec | Jill Cilmi, V | ice Preside | ent | |
| hereby accept to further agree to performance of the agent. Or, if this aereby confirm to | the appointment as in comply with the property duties, and I am s document is being | registered agent and ovisions of all statu familiar with and ad filed merely to refle has been notified in | l agree to ac tes relative ccept the obl | to the prop | ipacity per and c my posit | omplete |
| Ву: 💢 | ature of Registered Agent | uble | 05/30/2019 | | | |
| - | alf of an entity: | ` | | 1) | ate | |
| | Asst. Vice President | | | | | |
| | oed or Printed Name | | | | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (05/12)

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

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

| statement of che | provisions of sections 607,0502, 617. ange is submitted for a corporation or ar to change its registered office or re | ganized under the laws of the | State of UT |
|---|--|--|--|
| | the corporation: BUEHNER CONSTR | | inche of Funda. |
| - | office address:n Street SALT LAKE CITY UT 84115 | | |
| 3. The mailing a | address (if different): | | |
| 4. Date of incor | poration/qualification; 12/05/2011 | Document number: | F11000004868 |
| 5. The name and Florida Depar | f street address of the current registere rtment of State: (If resigned, enter resi | ed agent and registered office (gned) | on file with the |
| | NRAI SERVICES INC. | | |
| | 1200 SOUTH PINE ISLAND ROAD | | |
| | Plantation | FL 33324 | |
| 6. The name and (if changed): | I street address of the new registered a | egent (if changed) and /or regis | stered office |
| | Corporation Service Company | | 7 |
| | 1201 Hays Street | | U |
| | Tallahassee | FL 32301 | m m |
| The street addre | ss of its registered office and the stre be identical. | et address of the business off | lice of its registered agent. |
| Such change wa authorized by th | s authorized by resolution duly adop e board, or the corporation has been | ted by its board of directors o notified in writing of the chai | or by an officer so nge. |
| $-\infty$ | el C. Whee | Jill Cilmi, Vice President | |
| I hereby accept I further agree to performance of to agent. Or, if this hereby confirm to | the appointment as registered agent to comply with the provisions of all st my duties, and I am familiar with and s document is being filed merely to rehat the corporation has been notified agent. | atutes relative to the proper of accept the obligation of my effect a change in the register | city. and complete position as realistanal |
| | ature of Registered Agent | Date | |
| f signing on bel | nalf of an entity: | | |
| | Asst. Vice President | | |
| Ту | ped or Printed Name | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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