F15000001316

| LJA Engineering, Inc. |
|---|
| 2929 Briarpark Orive Suite 600 Houston, Texas 77042 |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
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| Office Use Only |



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09/18/17--01025--010 **35.00





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

| | | ns 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this |
|--|---|---|
| | - 1 | a corporation organized under the laws of the State of Texas |
| | | tered office or registered agent, or both, in the State of Florida. |
| 1. The name of | the corporation: $\frac{L J}{J}$ | A Engineering, Inc. |
| | office address:_22 ville, FL 32202 | 5 Water Street, 20th Floor, Suite 2000 |
| | | |
| | address (if different) | |
| 4. Date of incor | | Document number: F15000001316 |
| | | ne current registered agent and registered office on file with the esigned, enter resigned) |
| | Patrick Desiv | larais |
| | 225 Water S | reet, 20th Floor, Suite 2000 |
| | Jacksonville, | |
| 6. The name an (if changed): | | he new registered agent (if changed) and /or registered office |
| | BlumbergEx | elsior Corporate Services, Inc. |
| | 155 Office P | aza Drive, 1st Fl. |
| | | P.O. Box NOT acceptable |
| | Tallahassee | FL 32301 |
| The street addr as changed wil | ress of its registered It be identical. | office and the street address of the business office of its registered agent, |
| Such change wauthorized by | vas authorized by re the board, or the coi | solution duly adopted by its board of directors or by an officer so poration has been notified in writing of the change. |
| W. | | Calvin T. Ladner, President |
| I hereby accep I further agree performance o | to comply with the f my duties, and I a his document is bein | Printed or typed name and title s registered agent and agree to act in this capacity. provisions of all statutes relative to the proper and complete in familiar with and accept the obligation of my position as registered in filed merely to reflect a change in the registered office address, I on has been notified in writing of this change. |
| - | 17/ | August 22, 2017 |
| Asst. Secret | gnature of Registered Ages ary OSE Mojica chalf of an entity: | T. |
| | 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

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