F98000007110

(Requestor's Name)		
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	Certificate	e of Statue
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Special Instructions to	Filing Officer:	
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Office Use Only



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12/23/02--01060--022 **35.00



FILED

02 DEC 23 PH 3: 15

ECRETARY OF STATE

T BROWN DEC 2 3 2002

R.A. Change

CT CORPORATION

December 23, 2002

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re:

Order #: 5746416 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Oldcastle Precast, Inc. Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff_Netherton@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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

-	provisions of sections 607.0502, 617.0502, 607 corporation organized under the laws of the Stat	
	wing statement in order to change its registered	. •
the State of Floria	da.	
1. The name of the	ne corporation : OLDCASTLE PRECAST, INC	the same of the sa
2. The mailing ad	dress of the corporation: 375 Northridge Road, Sui	te 350, Atlanta, GA 30350
3. Date of incorpo	oration/qualification: 12/30/1998 [Occument number: F98000007110
4. The name and a	address of the current registered agent and office	E PECCE
Da	avid Piterski	
<u>73</u>	311 NW 77th St.	SSEE OF PH
M	ledley, FL 33166	
5. The name and a	address of the new registered agent (if changed) (P. O. Box Not Acceptable)	• • • • • • • • • • • • • • • • • • • •
<u>c</u> ,	T Corporation System	
clo	o C T Corporation System, 1200 South Pine Island Roa	d <u>.</u>
Pla	antation, Florida 33324	
The street address agent, as changed	s of its registered office and the street address d, will be identical.	of the business office of its registered
_ Ale	authorized by resolution duly adopted by its be board. LUCK an officer, chairman or vice chairman of the board) Shelley Savage Vice President	oard of directors or by an officer so (Date)
	(Printed or typed name and title)	••••••••••••••••••••••••••••••••••••••
corporation, I her I further agree to performance of m registered agent. CT Corposation Sys	stem. D	f process for the above stated nt and agree to act in this capacity. tive to the proper and complete e obligation of my position as
By: Oale	mature of Registered Agent)	(Date)
If signing on behalf of		
	OT AN ENTRY: DALE W. MORRIS ASSISTANT VICE PRESIDENT	
(Ту	ped or Printed Name)	(Capacity)

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