

L14000038061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

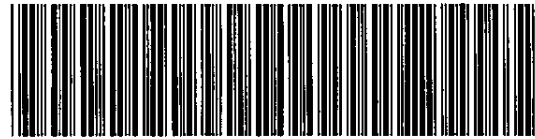
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

AdR
4/10/14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ruth Engineering & Construction, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Katherine Bloom

Name of Person

MyLLC.com, Inc.

Firm/Company

5716 Corsa Ave, Suite 110

Address

Westlake Village, CA 91362

City/State and Zip Code

diane.kalinowski@myllc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane Kalinowski

Name of Person

at (888) 886-9552

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2014

KARTHERINE BLOOM
MYLLC.COM, INC.
5716 CORSA AVE - STE. 110
WESTLAKE VILLAGE, CA 91362

SUBJECT: RUTH ENGINEERING & CONSTRUCTION, LLC
Ref. Number: L14000038061

We have received your document for RUTH ENGINEERING & CONSTRUCTION, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 114A00007655

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Ruth Engineering & Construction, LLC

2. (a) 3521 Tiger Ln Principal office address of limited liability company: (Note: **MUST BE STREET ADDRESS**)
 (b) 3521 Tiger Ln Mailing address of limited liability company: (Note: **MAY BE POST OFFICE BOX**)

Corpus Christi, TX 78415 Corpus Christi, TX 78415

3. 03/06/2014 Date of filing/registration in Florida 4. L14000038061 Document number

5. (a) Anthony R. Ruth
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3521 Tiger Lane
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Corpus Christi, FL 78415

(b) InCorp Services, Inc.
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

17888 67th Court North
NEW Registered Office Address:

Loxahatchee, FL 33470

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature] Signature of a member or authorized representative of a member Anthony Ruth Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature] on behalf of InCorp Services, Inc.
 Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
 FILING FEE: \$25.00

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 2PM APR - 4 PM 12: 58
 STATE OF FLORIDA
 TALLAHASSEE, FLORIDA