## 99000000028

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	

Office Use Only



600016780486

06/04/03--01015--019 \*\*25.00

DIVISION OF CORPORATION

## **CT** CORPORATION

June 4, 2003

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

Re: Order #: 5845030 SO

Customer Reference 1: NA Customer Reference 2: NA

Dear Secretary of State, Florida:

Please file the attached:

Driltech Mission LLC (DE) 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,

Connie R Bryan
Manager Fulfill Ctr
Connie\_Bryan@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 LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: Driltech Mission LLC
2. The mailing address of the limited liability company is: 13500 NW County Road 235
Alachua, Florida 32615
01/08/1999 M9900000028  3. Date of filing/registration in Florida 4. Document number
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florids Department of State:
CT Corporation System
Name 1660 E. Jefferson Street
Address
Tallahassee, Florida 32301
City, State and Zip
6. The name and address of the new registered agent and/or office:
C T Corporation System
Name
1200 South Fine Island Road
Florida street address (P.O. Box NOT acceptable)
Plantation pt. 33324
City, State and Zip
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 of a member of appharamentative of a member)
(Printed or typed name of signos)
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 chilications of my position as registered agent as provided for in Chapter 606, 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.  CONNEBRYAN  (Signature of Registered Agent)  SPECIAL ASSETANT SECRETARY
Division of Corporations, P.O. Box 6327, Tallahusses, FL 32314
DHEIL(10.00) FILING FEE: \$25.00