## P11000062084

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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
(Bı	ısiness Entity Name)	)
(Do	ocument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIO/

DEC 23 2014 T. CARTER

## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: RDT Construction Group, Inc.					
Name of Corporation					
DOCUMENT NUMBER: P11000062084					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Bobby L. Moore, Jr.  Name of Contact Person					
RDT Construction Group, Inc.					
Firm/Company					
3714 DMG Drive					
Address					
Lakeland, Florida 33811					
City/State and Zip Code					
BMemmoli@RDTConstructionGroup.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Barbara Memmoli 863  940-2004					
Name of Contact Person Area Code & Daytime Telephone Number					

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of ch	nge is submitted for a corporation of	.0302, 007.1308, or 617.1308, Florida Statute rganized under the laws of the State of Florida	1	<del></del>
		gistered agent, or both, in the State of Florida	L	
1. The name of	the corporation: RDT Construct	ion Group Inc		
2. The principal	office address: 3714 DMG Driv	re, Lakeland, Florida, 33811		
3. The mailing	address (if different): 3714 DMG	Drive, Lakeland, Florida, 33811	<del></del>	
4. Date of incom	poration/qualification: 07/07/201	1 Document number: P11000062	2084	
5. The name an		red agent and registered office on file with the		
	QUALITY FINANCIAL SE	RVICES INC		
	209 DUNLAWTON AVEN	UE SUITE 14		
	PORT ORANGE, FL 3212	27	14 DI	SECF TALL!
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed):		agent (if changed) and /or registered office	DEC 15	RETARY AHASSE
	Northwest Registered Age	ent, LLC.	P	E.P.C
	3030 N. Rocky Point Dr. S	STE 150A	2: 37	ORIC
		NOT acceptable	-	Ð'''
	Tampa, FL 33607			
The street addr as changed wil	ess of its registered office and the st be identical.	reet address of the business office of its regis	stered ag	zent,
Such change wanthorized by	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an office in notified in writing of the change.	r so	
Bobby L. Moore, Jr.  Signature of an officer or director  Printed or typed name and title				
I hereby accep I further agree performance o agent. Or, if the	the appointment as registered agen to comply with the provisions of all fmy duties, and I am familiar with a his document is being filed merely to hat the corporation has been notif	nt and agree to act in this capacity. statutes relative to the proper and complete ind accept the obligation of my position as re preflect a change in the registered office add	gistered ress, l	1
a	The	12/2/2014		
	mattere of Registered Agent	Date		
If signing on b	ehalf of an entity:			
Dan Keen-				
	Typed or Printed Name			

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