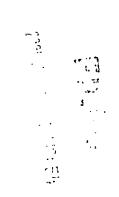
F0500000538

(Requestor's Name)
(Address)
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(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
. ,
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
Special instructions to 1 ming Officer.
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Office Use Only



01/23/24--01016--008 **35.00



COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: MOORE LINDNER ENGINEERING, INC. Name of Corporation	
DOCUMENT NUMBER: F05000000538	
The enclosed Statement of Change of Registered Office	re/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
C Williams	
Name of Contact Person	
Harbor Compliance	
Firm/Company	
1830 Colonial Village Lane	
Address	
Lancaster, PA 17601	
City/State and Zip Code	
professional@harborcompliance.com	n
E-mail address: (to be used for future annual repo	rt notification)
For further information concerning this matter, please	call:
Cindy Williams	at (717) 844-9912
Name of Contact Person	at (717) 844-9912 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depar	tment of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes n organized under the laws of the State of North C r registered agent, or both, in the State of Florida.	arolina
	the corporation: MOORE LINDNI		
	office address: 13663 Providence		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 01/19/2005	Document number: F05000000538	
5. The name and		stered agent and registered office on file with the	
	CORPORATION SERVICE COM	1PANY	
	1201 HAYS STREET		
	TALLAHASSEE, FL 32301-2525		ခ (၌
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	,
	REGISTERED AGENTS INC		
	7901 4th St N Ste 300		
	St. Petersburg, FL 33702	P.O. Box NOT acceptable] <u></u>
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its regist	ered agent,
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an officer seen notified in writing of the change.	so
/1/	Rob Moore	Rob Moore President	
_	re of an officer or director	Printed or typed name and title	
l hereby accept l further agree of my duties, an document is bei corporation has	the appointment as registered as to comply with the provisions of a dam familiar with and accept ting filed merely to reflect a chang sheen notified in writing of this c	gent and agree to act in this capacity, all statutes relative to the proper and complete p the obligation of my position as registered agent, ge in the registered office address, I hereby confi change.	erformance Or, if this rm that the
/s/T	Pavid Roberts	01/17/1024	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	David Roberts	_	
T	yped or Printed Name	_	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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