NO. 587 Pap. 1 of 1

## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Addount Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195 Phone : (850)521-1000 Fax Number : (850)558-1575

307 NOV 30 AH 8: 00

## REGISTERED AGENT CHANGE

FLORIDA ROCK INDUSTRIES, INC.

	<del></del>
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

14 change 1641/30/07

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

Fursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Floridain order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Florida Rock Industries, Inc.
2. The principal office address: 1200 Urban Center Drive
Birmingham, AL 35242
3. The mailing address (if different):
4, Date of incorporation/qualification: 6/13/1945 Document number: 144218
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
NRAI Services, Inc.
2731 Executive Park Drive, Suite 4
Weston, FL 33331
Weston, FL 33331  Weston, FL 33331  The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporation Service Company
1201 Hays Street 음景 8
(P.O. Box NOT acceptable)
Tallahassee, FL 32301
The street address of its registered office and the street address of the business office of its registered agent, is changed will be identical.
such change was authorized by resolution duly adopted by its board of directors or by an officer so withorized by the board, or the comporation has been notified in writing of the change.
(Symanuse of an original of the original of th
hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this occurrent is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.
By: 1-30-07
(Date)
Jeanine Reynolds as its agent
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CRZE045 (8/05)