10/01/2009 04:30

Division of Corporations

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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone

: (561)694-8107

Fax Number

: (561)694-1639

REGISTERED AGENT CHANGE

THE PBSJ CORPORATION

Certificate of Status	0
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Corporate Filing Menu

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTIL
FOR CORPORATIONS
Pursuant to the provisions of section 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 Florida in
order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation is: THE PBSJ CORPORATION
2. The principal office address: 5300 W. Cypress Street, Suite 200
Tampa FL 33607
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/1/1973 Document Number: 437291
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
SCHAFFER RECKYS
5300 WEST CYPRESS STREET, STE 200
6. The name and street address of the new registered agent (if changed) and /or registered office.
(if changed):
tienjamin P. Hillertield
5300 W. CYPRESS ST. STE 200 (P.O. Box Not acceptable)
TAMPA FL 33607
The street address of its registered office and the street address of the business office of its registered
agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director) Angela Housard as a Hy in Fact (Printed or Typed name and tide)
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 obligation of my position as registered
agent. Or, if this document is being filed merely to reflect a change in the registered office address. 1
(Signature of Registered Agent) A HOLDOVO OS (Date)
If signing on behalf of an entity: atty in fact

(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

Corporate Creations International Inc. 11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107