437846

(Requestor's Name)			
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(Address)			
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(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
	_		
(Business Entity Name)			
(Document Number)			
Codifical Consists			
Certified Copies Certificates of Status	-		
	7		
Special Instructions to Filing Officer:			





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SECRETARY OF STATE
SECRETARY OF STATE

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

		7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida
	-	egistered agent, or both, in the State of Florida.
1. The name of	the corporation: Railroad Track Co	onstruction Company
2. The principal	office address: 7411 Fullerton St.	, Suite 300
Jacksonvi	lle, FL 32256	
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 10/08/73	Document number: 437846
	d street address of the current register rtment of State:	red agent and registered office on file with the
	Heidi J. Eddins	TASE TO THE TASE OF TASE OF THE TASE OF TH
	One Malaga Street	ARE SE
	St. Augustine, FL 32084	ASSET
6. The name and (if changed):	d street address of the new registered	SECRETARY OF STATE AHASSEE, FLORID agent (if changed) and /or registered office
	Heidi J. Eddins	
	10151 Deerwood Park B (P.O. Box NOT accept	Ivd., Building 100, Suite 350
	Jacksonville, FL 32256	
The street address changed will	ess of its registered office and the st be identical.	reet address of the business office of its registered agent,
Such change was authorized by the	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an officer so in notified in writing of the change.
(Signati	ure of an officer or director)	Heidi J. Eddins, Secretary (Printed or typed name and title)
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agen to comply with the provisions of all ad I am familiar with and accept the ng filed merely to reflect a change i s been notified in writing of this cha	nt and agree to act in this capacity. statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the inge.
Hud	1 J. Eddus	01/26/07
	gnéture of Registered Agent)	(Date)
ii signing on be	half of an entity:	
(1	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 CR2E045 (8/05)