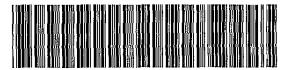
563823

(Red	questor's Name)						
(Add	lress)						
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(City	//State/Zip/Phone	e #}					
PICK-UP	☐ WAIT	MAIL					
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SECRETARY SEC. FLORIDA

EACH9

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Hewett-Kier Construction, Inc. (Name of corporation)
(Name of corporation)
DOCUMENT NUMBER: 563823
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:
James R. Hewett
(Name of contact person)
Hewett-Kier Construction, Inc.
(Firm/Company)
3451 NW 14th Avenue
(Address)
Pompano Beach, FL 33064 (City/state and zip code)
For further information concerning this matter, please call:
Michael E. Stearns, Esq. at (954) 382-9199 (Name of contact person) (Area code & daytime telephone number)
(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 409 E. Gaines Street Tallahassee, FL 32319

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

Pursuant to the p statement of chan in order		for a corp	oration org	ganized unde	er the laws of th	ne State of _	Florida
1. The name of th	•	_		. •		-	
2. The principal of							FL 33064
3. The mailing ac	Idress (if differe	ent): N	/A	,		,	
4. Date of incorp	oration/qualific	ation:	1/5/78	Do	cument numbe	r: 5638	323
5. The name and Florida Depart		of the curre	nt registere	d agent and	registered offic	ce on file wit	h the
	Adam C.	Linkh	orst, I	Esq.			-
	c/o Tayl	lor St	earns l	Linhors	t and Rol	berts,	B:A· Q
	1390 N.	Unive	rsity N	Or., Ft	. Lauder	dale, F	1-1332g
6. The name and (if changed):	street address o	of the new	registered a	igent (if chai	nged) and /or re	egistered offi	ice SST 2
	Michael	E. Ste	earns,	Esq.	_		E.F.S.
	c/o Leib		irns an		ts, P.A.	· · · · · · · · · · · · · · · · · · ·	- PRICE 25
	1390 N.	·			. Lauderd	dale, FI	ر <u>د</u> 333 22
The street addre	ess of its registe Besidentical.	ered office	and the str	eet address	of the busines	s office of it	ts registered agent,
Such change was authorized by the	,	,					
//-	ire of an officer or di	Hen	Al		Sames R.		
I herely accept I further agree to of my duties, an document is bei corporation has	the appointment to comply with a d I am familian ng filed merely to been notified	nt as regis the provis r with and r to reflect in writing	tered agen ions of all accept the a change i of this cha	t and agree statutes rela obligation on the registe nge.	to act in this cative to the proof of my position cred office add	capacity. oper and con as registere lress, I herel	nplete performance d agent. Or, if this by confirm that the
11/2	gritature of Registered	(Ament)	· · · · · · · · · · · · · · · · · · ·	·	5/21/6	(Date)	
If signing on be		• ′			' /	<u></u>	
	E. Stear	-	q.		-		
(1)	Typed or Printed Nar	me)	· ·				

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