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CORPORATION SERVICE COMPANY

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	Si	t. Louis, 1	MO 631	67			

CHANGE OF AGENT

NAME: LEONARD CONSTRUCTION COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight EX 2956

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

Pursuant 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 <u>Delaware</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LEONARD CONSTRUCTION COMPANY

2. The principal office address: 800 North Lindbergh Blvd.

St. Louis, MO 63167

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3. The mailing address (if different):\_

4. Date of incorporation/qualification: February 2, 1946 Document number: 806065

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

	C T Corporation System	A	10	
	1200 South Pine Island Road	LLAF	4 HA	
	Plantation, FL 33324	TARY	28	FL
6. The name ar (if changed)	1200 South Pine Island Road       AT         Plantation, FL 33324       FORMATION         Che name and street address of the new registered agent (if changed) and /or registered office       FORMATION	ED		
	Companyation Company	27		

Corporation Service Company

1201 Hays Street

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32301

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.

1 o Signature of an officer or director

Louis J. Giaccardo, Attorney in Fact (Printed or typed name and title)

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, I hereby confirm that the corporation has been notified in writing of this change.

ation Service Compar PIDIN (Signature of Registered Ager

If signing on behalf of an entity:

Jacqueline M. Giles

(Typed or Printed Name)

May 20, 2004

Assistant Vice President

(Capacity)

(Date)

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

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