827912

•					
(Requestor's Name)					
(Address)					
(Address)					
(Addless)					
(City/State/Zip/Phone #)					
, , , , , , ,					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
,					
Special Instructions to Filing Officer:					
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03/06/08--01045--001 **35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

R.A. Change

TB 3-10-08

COVER LETTER

TO: Amendment Section Division of Corporat	ións					
SUBJECT:	Hilldrup Companies, Inc.					
	(Name of Corporatio	n)				
DOCUMENT NUMBER:_	827912					
The enclosed Statement of C	hange of Registered Office/Agent a	and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:						
rease return an correspondence concerning this matter to the ronowing.						
	<i>:</i>					
Hilton G. Marshall						
(Name of Contact Person)						
Hilldrup Companies, Inc.						
(Firm/Company)						
	4000 T. CC					
	4022 Jefferson Davis Highv	vay				
(Address)						
Stafford, VA 22554						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
	orning tine matter, prease carr.					
Hilton G. Marshall	at (703) 441-7225				
(Name of Con	ntact Person) (A	703 441-7225 rea Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.						
		G				
Mai Ame	ling Address: endment Section	Street Address: Amendment Section				
	ision of Corporations	Division of Corporations				
	. Box 6327	Clifton Building				
	ahassee, FL 32314	2661 Executive Center Circle				
	· · · · · · · · · · · · · · · · · · ·	Tallahassee FL 32301				

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

statement of chan	ge is submitted for	s 607.0502, 617.0502, 6 a corporation organizea tered office or registered	l under the laws of the S	tate of <u>Virginia</u>		
1. The name of th	e corporation:	Hilldrup Companies, Inc.				
2. The principal of						
		Stafford, VA 2255	4			
3. The mailing ad	ldress (if different):	Post Office Box 1	290			
		Stafford, VA 2255	5			
4. Date of incorpo	oration/qualification	n: <u>9.15.58</u>	_ Document number:	827912		
5. The name and Florida Depart		e current registered agen	t and registered office or	i file with the		
-		Peter Gaudion		1 2		
		750 Central Florid	a Parkway	SECO M		
_		Orlando, FL 32824				
6. The name and (if changed):	street address of the	e new registered agent (i	f changed) and /or regist	2008 HAR - 6 PH 12: 20 SECKETARY OF STATE TALLAHASSEE, FLORID TOTAL CONTROL OF STATE TOTAL		
		Peter Gaudion		20		
		2300 Principal Roy (P.O. Box NOT acceptable)	w, Suite 103			
_		Orlando, FL 32827				
The street address as changed will I	ss of its registered be identical.	office and the street add	dress of the business off	ice of its registered agent,		
17/100	s authorized by res e board, or the corp e of an office of arector	olution duly adopted by portation has been notifi	tits board of directors of the cha in writing of the cha Hilton G. Marsi (Printed or typed	hall		
I hereby accept to I further agree to	the appointment as	registered agent and a provisions of all statutes	gree to act in this capa s relative to the proper	city. and complete performance egistered agent. Or, if this , I hereby confirm that the		
/ Meg (Sigh	nature of Registered Ager	11)	7/2/8 (Date)		
If signing on beh	nalf of an entity:					
Peter Gaud	ion					

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