955689

(Pan	uestor's Name)	
(rteq	destors reame)	
(A'-L-1		
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
	•	
(Bus	iness Entity Nar	ne)
(= 3.5		··- ,
(Doc	cument Number)	
(200	ament Hamber,	
Cartified Conies	Certificates	of Statue
Certified Copies	Certificates	S OI Status
Special Instructions to F	iling Officer:	
_		
	•	

Office Use Only



300242987513

PANTANGE FLORING

FILED 12 DEC 21 PH 4: 03

RECEIVED

DEC 2.1 TOP?

7. LEMIEUX

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/21/12

NAME:

RENTENBACH CONSTRUCTORS INC.

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

ABBIE/PAUL HODGE **AUTHORIZATION:**

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

1. The name of	he corporation: RENTENBACH	CONSTRUCTORS	INCORP	ORAII
• •	office address: Sutherland Avenue	Knoxville	TN	3797
3. The mailing a	ddress (if different):	16		
	P.O. BOX 11087	Knoxville	TN	379 <u>7</u>
4. Date of incorp	poration/qualification: March 3, 19	Document number:	8556	909
	I street address of the current registered a tment of State: (If resigned, enter resigne		file with the	
•	CT Corporation	•		
	1200 S. Pine Is	sland Road		2 330 M
	Plantation, F	L 33324		S 33
	National Corporate Res 155 Office Plaza Drive	earch, Ltd., Inc.	FL SA	PM 4: 03
	Tallahassee, FL 3230	•		
	ess of its registered office and the street be identical. as authorized by resolution duly adopted the board, or the corporation has been no	address of the business office		
	re of an officer or director	Greg A. Ratelif	e and title	
I nereby accept I further agree performance of agent. Or, if th	the appointment as registered agent an to comply with the provisions of all state my duties, and I am familiar with and a is document is being filed merely to refl that the corporation has been notified i	d agree to act in this capacit utes relative to the proper an iccept the obligation of my po ect a change in the registered n writing of this change.	y. d complete osition as regis d office addres	stered is, I
neresy comprin	, , , , , , , , , , , , , , , , , , ,			

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

Typed or Printed Name