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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## REGISTERED AGENT CHANGE PSA CONSULTING ENGINEERS, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Corporate Filing Menu

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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 Oklahomain order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: PSA CONSULTING ENGINEERS, INC.		
2. The principal office address: 3031 NW 64th Street, Ste 101		
Oklahoma City OK 73116		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 12/26/20	001 Document number: F01000006615	
5. The name and street address of the current regist Florida Department of State:		
CT Corporation System	·	
1200 South Pine Island R	toad	
Plantation FL 33324		
6. The name and street address of the new register (if changed):	ed agent (if changed) and /or registered office	
Corporation Service Con	npany	
1201 Hays Street		
(P.O. Box NOT acceptable)		
Tallahassee, FL 32301		
The street address of its registered office and the as changed will be identical.	street address of the business office of its registered agent,	
Such change was authorized by resolution duly authorized by the board, or the corporation has be	adopted by its board of directors or by an officer so been notified in writing of the change.	
Maureentathet	Maureen Cathell, Attorney in Fact	
(Signature of an officer or director)	(Printed or typed name and title)	
I hereby accept the appointment as registered at I further agree to comply with the provisions of of my duties, and I am familiar with and accept document is being filed merely to reflect a chang corporation has been notified in writing of this corporation Service Company	gent and agree to act in this capacity, all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if this age in the registered office address, I hereby confirm that the change.	
By: 8 11/442	April 20, 2010 (Date)	
(Signature of Registered Agent)  If signing on behalf of an entity:	(male)	
Sylvia Quennet Assistant VP		
ANNOTED AND A STATE OF THE STAT		

\* \* \* 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)

(Typed or Printed Name)