Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6380

Prom:

Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 Phone : (561)508-5033 Fax Number ; (561)694-1639

**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 AMEC FOSTER WHEELER NORTH AMERICA CORP.

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T. LEMMEUX

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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 Delawate
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Amec Foster Wheeler North America Corp.
2. The principal office address: 53 FRONTAGE ROAD
HAMPTON, NJ 08827-9000
3. The mailing address (if different): 53 FRONTAGE ROAD, PO BOX 9000
HAMPTON, NJ 08827-9000
4. Date of incorporation/qualification: 01/08/2002 Document number: F0200000148
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
United Agent Group Inc.
11380 Prosperity Farms Road #221E
P.O. Box NOT acceptable
Palm Beach Gardens, FL 33410
The street address of its registered office and the street address of the business office of the presistent 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.
By: Danielle Gossman, Attorney-in-Fact
Signature of an officer or director Printed or typed name and title
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.
02/16/2018
Signature of Registered Agent Uste
f signing on behalf of an entity:
Danielle Gossman, Special Secretary Tyred or Printed Name
* * * 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 (03/12)