## F020000000000

(5)	
(Requestor's Name)	
(Address)	
(Address)	
(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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Office Use Only



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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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AFFKUYEB AND FILED

C. LEWIS

NOV 4 2013

EXAMINER



\*\*CSC - WILMINGTON ...
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Smetana

Date: October 24, 2013

Order#: 849624-016

Re: FLATIRON CONSTRUCTORS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Alex Smetana c/o Corporation Service Company

2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 60 inge is submitted for a c r to change its registere	orporation organize	ed under the la	ws of the State	of Delawa	are
1. The name of t	the corporation: FLATI	RON CONSTRUCT	ORS, INC.			
2. The principal	office address:5 Frontage Road, Fires					
3. The mailing a	ddress (if different):					·
4. Date of incorporation/qualification: 05/24/200			Document number:F0200002600			
	I street address of the cu tment of State: (If resign		nt and registere	ed office on file	with the	
	C T Corporation Syste	m				Ās <del>≓</del>
	1200 South Pine Island	d Road				3 001 ECRE
	Plantation		FL	33324		%; }} }}
6. The name and (if changed):	street address of the ne		if changed) an	d /or registered	office	ANII: 07 Y OF STATE SEE, FLORID
	1201 Hays Street	опрану			_	>*
		PO Box NOT acc	eptable			
	Tallahassee		FL	32301	<del></del>	
The street addre	ess of its registered office be identical.	ce and the street add	iress of the bu	siness office of	f its regist	ered agent,
Such change wa authorized by th	is authorized by resoluti ie board, or the corpora	ion duly adopted by tion has been notifi	its board of ded in writing o	lirectors or by a of the change.	an officer	so
				Dona Priet		President
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as reg on comply with the proving my duties, and I am fan is document is being file that the corporation has n Service Company	isions of all statutes niliar with and acce ed merely to reflect s been notified in w	gree to act in s s relative to the	e proper and c ion of my posit	omplete ion as reo	istered ess, I
Ву:			10/18/2013			
	nature of Registered Agent			Date		
Grace E. Kirby,	,					
	ped or Printed Name					

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