Florida Department of State

Division of Corporations ... Public Access System

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REGISTERED AGENT CHANGE

BRINJAC ENGINERING, INC.

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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 617.150	98, Florida Statutes,
this statement of Pennsylvania	=	orporation organized under the laws of s registered office or registered agent,	•
of Florida.	•		
1. The name of	the corporation: BRINJAC E	NGINERING, INC.	
2. The principal	office address: 114 North Se	econd Street, Harrisburg, PA 17101	
·			<u> </u>
3. The mailing	address (if different):		90 CT F02000005537 19
			<u> </u>
4. Date of incor	poration/qualification:11/	4/2002 Document number:	F02000005537 🧿
	d street address of the current rtment of State;	t registered agent and registered office of	on file with the
	C T CORPORATION SYSTE	EM	
	1200 SOUTH PINE ISLAND	ROAD	
	PLANTATION FL 33324		
6. The name at changed):	nd street address of the new	registered agent (if changed) and /or	registered office (if
	Business Filings Incorporated	B	
	1203 Governors Square Blvd.	., Suite 101	
	(P.O. Box or p Tallahassee, FL 32301-2960	personal mailbox NOT acceptable)	
The street addragent, as chang	ess of its registered office an ed will be identical.	d the street address of the business off	ice of its registered
Such change wanthorized by	as authorized by resolution of the board, or the corporation	fuly adopted by its board of directors of has been notified in writing of the char	т by an officer so nge.
	, chairman or see chairman of the board)	John Brinjac, President	
I hereby accept I further agree performance of	the appointment as register to comply with the provision my duties, and I am familia	ed agent and agree to act in this capac is of all statutes relative to the proper of r with and accept the obligation of my ing filed merely to reflect a change in poration has been notified in writing of	city. and complete position as
L.	لفحيا	10/1/09	_
,	ignature of Registered Agent)	(Date)	
If signing on behaling Mark Williams	If of an entity:	AVP	
·	Typed or Printed Name)	(Canacina)	

* * * FILING FEE: \$35.90 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314