103000001994

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	.
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu:	siness Entity Nan	ne) ,
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
	·	

Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE





May 10, 2007

FLORIDA SECRETARY OF STATE Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: BUILDING EXCHANGE COMPANY

Dear Filing Officer:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, for the above referenced name, which is to be filed in your office. Also enclosed is check #13158 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions, please contact x353 at 800-345-4647.

Thank you,

MSH

Myra Simmons-Homer Registered Agent Services

Enclosures

PO BOX 1831 AUSTIN, TX 78767

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: BUILDING EXCHANG (Name of Cor	E COMPANY poration)
DOC	JMENT NUMBER: F03000001994	
The en	nclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to	the following:
	Myra Ho (Name of Contr	mer ect Person)
	Capitol Corporate (Firm/Com	Services, Inc.
	800 Brazos, S (Addres	
	Austin, Texas (City/State and	78701 Zin Coda)
For fin	rther information concerning this matter, please cal	•
	Myra Homer	at (800) 345-4647
	(Name of Contact Person)	at (800) 345-4647 (Area Code & Daytime Telephone Number)
Enclos	ed is a \$35.00 check made payable to the Departme	ent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of ch	e provisions of sections 607.050 uange is submitted for a corpora ter to change its registered office	tion organized under the la	ws of the State of <u>Virginia</u>	his
1. The name of	the corporation:	BUILDING EXCH	ANGE COMPANY	
2. The principa	d office address: 5600 Cox Ros	d, Glen Allen, VA 23060		
3. The mailing	address (if different): 5600 Co	Road, Glen Allen, VA 23	080	
4. Date of incom	rporation/qualification: 4/18/20	03 Document	number: <u>F03000001994</u>	
	id street address of the current re atment of State:	gistered agent and registere	d office on file with the	
	Sloan, F. Linton			
	201 S. Orange Ave., Ste. 1	350	200	77"
	Orlando, FL 32801			
6. The name an (if changed):	d street address of the new regis	tered agent (if changed) and	Vor registered office ()	P. TO
	Capitol Corporate Services	i. Inc.		3 2
	155 Office Plaza Drive, Su (P.O. Box NO		P	
	<u>Tallahassee</u>	Florida	32301	
The street address changed will	ess of its registered office and t	he street address of the bu	siness office of its registere	d agent,
_	as authorized by resolution dul be board, or the corporation has			
Signal Control	W. Vaudon	_ Hope M.	VAUGhan Asst. S	Ecrepany
hereby accept further agree fmy duties, an locument is bei corporation has	the appointment as registered to comply with the provisions of d I am familiar with and accep- ng filed merely to reflect a cha s been notified in writing of this	agent and agree to act in t f all statutes relative to the it the obligation of my post nge in the registered office i change.	his capacity, proper and complete perf tion as registered agent. C address, I hereby confirm	ormance Ir, if this that the
Dua	nu Case	5-9		
	nature of Registered Agent) half of an entity:		(Date)	
	Secretary on Behalf of Capilol Corpo yead or Printed Name)	orate Services, Inc.		

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

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

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: BUILDING EXCHANGE (Name of Corp.)	E COMPANY
DOCUMENT NUMBER: F03000001994	
The enclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Myra Hon	ner
(Name of Contact	it Person)
Capitol Corporate S	ervices, Inc.
(Finn/Comp	any)
800 Brazos, St. (Address	vite 400
(a ### 200)	,
Austin, Texas	78701
(City/State and Z	ip Code)
For further information concerning this matter, please call:	
Myra Homer as (Name of Contact Person)	t (<u>800</u>) <u>345-4647</u> (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departmen	it of State.
Mailing Address: Amendment Section	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassce, FL 32301

Return acknowledgment to:

*

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

statement of ch	ange is submitted for a	507.0502, 617.0502, 607. corporation organized w red office or registered ag	ider the laws of t	he State of <u>Virginia</u> .
1. The name of	the corporation:	BUILDING	3 EXCHANG	BE COMPANY
2. The principa	l office <u>eddress: 5600 C</u>	Cox Road, Glen Allen, \	/A 2 <u>3080</u>	
3. The mailing	address (if different); 56	600 Cox Road, Glen Al	en, VA 23060	
4. Date of incom	poration/qualification:	4/18/2003I	ocument numbe	r. F03000001994
	d street address of the cariment of State:	urrent registered agent an	d registered offic	e on file with the
	Sloan, F. Linton			
	201 S. Orange Ave.	, Ste. 1350		
	Orlando, FL 32801			
6. The name and (if changed):	d street address of the ne	ew registered agent (if ch	anged) and /or re	gistered office
	Capitol Comorate S	Services, Inc.		TEST ?
	155 Office Plaza Dr	IVe, Suite A D. Box NOT acceptable)		RICE
	Tallahassee	Flor	ida	<u> 32301</u>
The street address changed will	ess of its registered offi	ce and the street address	of the business	office of its registered agent,
_		tion duly adopted by its ation has been notified in		
Marco 6	N. Sando	s H	De M. VAU	whon Ast. Secretars
	the apprintment as rec	ristered agent and agree	14	peo name and title)
I further agrée i of my duties, an document is bei corporation has	to comply with the prov d I am familiar with an ing filed merely to refle s been notified in writin	visions of all statutes reliated accept the obligation of a change in the regist of this change.	ative to the prop of my position a ered office addr	pacity. er and complete performance s registered agent. Or, if this ess, I hereby confirm that the
Dua	Lase Case		5-8-6	- (date
•	half of an entity:		(6	,

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

Delanie Case, Asst. Secretary on Behalf of Capitol Corporate Services, Inc.
(Typed or Printed Name)