(Requestor's Name)			
(Address)	700238110		
(Address)	700230110		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL	08/06/1201024		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:	The Williams		
	•		
	M m		
	4 My CS		

Office Use Only



897

013 **35.00



J 8.

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: WPC Engineering, Inc.

Name of Corporation

DOCUMENT NUMBER:

P04000000691

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barbara Boerner

Name of Contact Person

Terracon Consultants, Inc.

Firm/Company

18001 W. 106th St., Suite 300

Address

Olathe, KS 66061

City/State and Zip Code

blboerner@terracon.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Boerner

,913

577-0384

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department 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

 The name of The principal 	the corporation: WPC Enginee office address: 1450 Fifth Stre	ring, inc. et, West, North Charlesto	n, SC 2	9405		
3. The mailing a	address (if different): 18001 W.	106th St., Suite 300, Olath	e, KS (6061		
4. Date of incor	poration/qualification: 8/14/06	Document number: P0	400006	891	.,,	
5. The name and	d street address of the current registor rtment of State: (If resigned, enter re	ered agent and registered office on f	ile with th	e		
	Wolf WPC Inc.					
	3047-4 St. Johns Bluff Ro	is	,	W,	2	
	Jacksonville, FL 32224				2 8 12 AUG	
6. The name and (if changed):	d street address of the new registered	l agent (if changed) and /or register	ed office	AHASSME	9	
	Corporation Service Com	pany			AM III	j ge
	1201 Hays Street			50 V	<u></u>	
	Tallahassee, FL 32301	NOT acceptable	***	jūr.		
The street address changed will	ess of its registered office and the st be identical.	reet address of the business office	of its regi	istered ag	gent,	
_	as authorized by resolution duly add ne board, or the corporation has bee	opted by its board of directors or by n notified in writing of the change	y an office	er so		
MAN	GUE	M. Gayle Pa	ker ind title	, Sec	reto	w
neriormance at	the appointment as registered ager to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notif.	na accent the oblivation of my bos	mon as re	ерізіегеи	!	
l E. Cilmi AV	hature of Registered Agent	07/18/2012 Date				
If signing on be	half of an entity:					
Corporation :	Service Company yped or Printed Name					

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