Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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REGISTERED AGENT CHANGE HENNEMAN ENGINEERING, INC.

Certificate of Status	0
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Corporate Filing Menu

Help

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7/30/2015

COVER LETTER

Amendment Section
Division of Corporations TO: Honneman Engineering, Inc. SUBJECT: Name of Corporation F05000006497 DOCUMENT NUMBER: 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: Hester Odendaal Name of Contact Person Honneman Engineering, Inc. Firm/Company 1605 South State Street Address Champaign, IL 61820 City/State and Zip Code hodendsai@henneman.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Amendment Section Mailing Address: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (03/12)

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

	to provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this thange is submitted for a corporation organized under the laws of the State of Illinois	
	der to change its registered office or registered agent, or both, in the State of Florida.	
l. The name o	f the corporation: Henneman Engineering, Inc.	
	al office address: 1605 South State Street Champaign, IL 61820	
		
3. The mailing	address (if different):	
4. Date of inco	prporation/qualification: 11/8/2005 Document number: F05000006497	_
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Joseph B. Summers	
	451 Edgewater Ct.	
	Marco Island, FL 34145	
6. The name ar (if changed):		<u></u>
	C T Corporation System	=
	c/o C T Corporation System, 1200 South Pine Island Road	ω Э
:	P.O. Box NOT acceptable	D E
	(1) (1) (2) (3) (4) (5) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	$\frac{1}{2}$
The street address changed will	ress of its registered office and the street address of the business office of its registered agent,	וני על
Such change wanthorized by t	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
	The many Arole Now	
	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of ull statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
	reporation System Terence Hardley Asst. Secretary 7 28 15	
If signing on be	chalf of an entity:	
	yped 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)