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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

: (614)573-3996 Fax Number

**Enter the email address for this business entity to be used for future

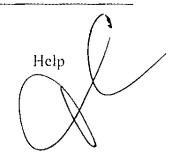
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REGISTERED AGENT CHANGE AUSTIN BUILDING AND DESIGN, INC.

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By:

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation orgo	502, 607.1508, or 617.1508, Florida Statute anized under the laws of the State of Delawa stered agent, or both, in the State of Florida	are
	he corporation: Austin Building and De	, and the second	'.
	office address: 6095 Parkland Blvd., Cle		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification; 02/23/2006	Document number: F06000001186	
	street address of the current registered tment of State: (If resigned, enter resigned)	agent and registered office on file with the ned)	. 20
	ELDEN, CHRISTOPHER	(° (°	24 25
	2235 N COURTENAY PKWY, 1ST FL	OOR. UNIT A HANGE SEE SEE STATE (if changed) and for remistared office	0V 21
	MERRITT ISLAND, FL 32953	NS\$	
6. The name and (if changed):	street address of the new registered ag	ent (if changed) and /or registered office	2024 NOV 21 AM 10: 27
	C T Corporation System		
	1200 South Pine Island Road		
	P.O. B Plantation, Florida 33324	on NOT acceptable	
The street addre	ss of its registered office and the stree be identical.	et address of the business office of its regis	tered agent.
Such change wa authorized by th	s authorized by resolution duly adopte e board, or the corporation has been r	ed by its board of directors or by an officer notified in writing of the change.	r 80
Michael C. N	MCNUTT Digitally signed by Michael C, McNutt Date: 2024 11:21 08:36:42 -05:00"	Michael C. McNutt VP o	f Finance
Signatur	e of an officer or director	Printed or typed name and title	
I further agrée to of my duties, and document is beir corporation has	been noujiea in writing of this chang	itutes relative to the proper and complete p bligation of my position as registered agen the revistored office address. I hereby cont	performance t. Or, if this irm that the
C T Corporation	Stephone Honzy	11/20/2024	
Sign	sature of Registered Agent	Date	
If signing on bel	nalf of an entity:		
	Assistant Secretary ped or Printed Name		
	* * * FILING F	FEE: \$35.00 * * *	