F06000006639

(Requestor	s Name)
(Address)	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business E	Entity Name)
(Document	Number)
Certified CopiesC	ertificates of Status
Special Instructions to Filing Of	fficer:

Office Use Only



600116777416

02/05/08--01017--005 **35.00

SECRETARY OF STATE

Rochange FLORIDE Thewis

FILED

COVER LETTER

Division of Corporations .
SUBJECT: CONSTRUCTION SCIENCE AND ENGINEERING, INC. (Name of Corporation)
DOCUMENT NUMBER: F0600006639
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:
J. KAREN BLOHM (Name of Contact Person)
CONSTRUCTION SCIENCE AND ENGINEERING, INC. (Firm/Company)
218 EAST MAIN STREET (Address)
WESTMINSTER SC 29693 (City/State and Zip Code)
For further information concerning this matter, please call:
MIKE PARROTTO at (407) 841-7095 (Name of Contact Person) (Area Code & Daytime Telephone Number)

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

Amendment Section -

TO:

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CONSTRUCTION SCIENCE AND ENGINEERING, INC.
2. The principal office address: 218 EAST TWAIN STREET
WESTMINSTER, SC 29693
3. The mailing address (if different): 5AME
4. Date of incorporation/qualification: 10/20/2006 Document number: F06000006639
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
MIKE PARROTTO
4704 L.B. MCLEOD ROAD, SUITEB 声点 量
ORLANDO, FL 32811 32811
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
3319 BARTLETT BOULEVARD
ORLANDO, FL 32811 (P.O. Box NOT acceptable)
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director) DEREK HODGN, PRESIDENT (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Will Must 1/30/08 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Mike PARROHO
(Typed or Printed Name)

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