F07000002555

(Re	equestor's Name)						
(Ad	(Address)						
(Address)							
(Cit	ty/State/Zip/Phone	e #)					
							
PICK-UP	☐ WAIT	MAIL					
(Bu	siness Entity Nan	ne)					
(Document Number)							
Certified Copies	_ Certificates	of Status					
Special Instructions to	Filing Officer:						
		1					

Office Use Only



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10/20/14--01024--001 **35.00

OCT 20 PH I2: 04

NOV 03 2014 C. CARROTHERS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: October 17, 2014

Order#: 337962-003

Re: COMPLETE CONSTRUCTION COMPANY

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Morgan Kennedy c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted	ctions 607.0502, 617.0 I for a corporation org egistered office or reg	ganized under i	the la	ws of the S	State of KY
	_	COMPLETE CONST	-			
2. The principal	office address:	4606 SUNNY HILL DF	RIVE, CREST\	WOO	D, KY 400	14
3. The mailing a	nddress (if differe	ent):				
4. Date of incorp	poration/qualific	eation: 05/11/2007	Docu	ment	number: _	-07000002555
		of the current registered (If resigned, enter resign		gister	ed office o	n file with the
	JOHNSON, DA	WN R				
	3419 GALT OC	CEAN DRIVE, SUITE	Α			
	FORT LAUDE	RDALE		FL	33308	
6. The name and (if changed):	l street address c	of the new registered a	gent (if change	ed) an	ıd /or regis	tered office
	Corporation Se	ervice Company				8 7
	1201 Hays Stre	eet				20
	Tallahassee	P O. Box N	OT acceptable	FL	32301	PH IZ:
The street address changed will	ess of its register be identical.	red office and the stre	et address of t	he bu	isiness off	ice of its registered agent,
Such change wa authorized by th	as authorized by ne board, or the	resolution duly adopt corporation has been	ted by its boar notified in wri	d of d	directors o	r by an officer so age.
O	26-		Dona Prie	be, V	ice Presid	ent
5	re of an officer or dire		,		ed or typed na	
I further agree i performance of agent. Or, if th hereby confirm	to comply with t my duties, and h is document is b	ation has been notified	tatutes relative d accept the ol eflect a change	e to th bligat e in th	ie proper d ion of my he register	city, and complete position as registered red office address, I
By:	are dek	(v.b).	10/17/201	14		
Sig	nature of Registered A	Agent			Date	
If signing on be	half of an entity	:				
Grace E. Kirby,	Asst. Vice Pres	ident				
T	yped or Printed Name					

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