Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCAC00000023

Phone : (85C)205-8842 Fax Number : (85C)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE SCHNACKEL ENGINEERS, INC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
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Corporate Filing Menu

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JUN 26 2015

6/25/2015

COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: Sch nackel Engineers, Inc. Name of Corporation |
| DOCUMENT NUMBER: FOSDO 6005043 |
| 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: |
| David Korn Name of Contact Person |
| |
| Firm/Company |
| |
| 1021 main 5t. 5tc. 1150 |
| Address |
| Houston TX 7'7002 City/State and Zip Code |
| City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Name of Contact Person at (7/3) 332~1752 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

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)

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

| statement of c | hange is submitted for a corpora | 2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tion organized under the laws of the State of Nebrask | <u>a</u> |
|---|---|---|----------|
| in or | der to change its registered offici | e or registered agent, or both, in the State of Florida. | |
| | of the corporation: SCHNACKEL | | |
| 2. The princip | al office address: 3035 S 72ND S | T OMAHA, NE 68124 | |
| 3. The mailing | g address (if different): | | |
| 4. Date of inc | orporation/qualification: 11/24/2 | 008 Document number: F08000005043 | |
| | and street address of the current repartment of State: (If resigned, en | egistered agent and registered office on file with the tter resigned) | |
| | NATIONAL CORPORATE RE | SSEARCH,LTD.,INC. | |
| | 115 North Calhoun St. Suite 4 | | |
| | Tallahassee, FL 32301 | | 15 JUN |
| 6. The name a | _ | istered agent (if changed) and /or registered office | 25 |
| | C T Corporation System | | AFF |
| | 1200 South Pine Island Road | | t) |
| | Plantation, Florida 33324 | P.O. Box NOT acceptable | |
| The street ad as changed w | dress of its registered office and | the street address of the business office of its registered ag | ent, |
| Such change authorized by | was authorized by resolution du y the board, or the corporation h | nly adopted by its board of directors or by an officer so as been notified in writing of the change. | |
| | Domis Bell | Printed or typed name and title | _ |
| I hereby according further agree agent. Or, if hereby confine | ept the appointment as registere se to comply with the provisions of my dulies, and I am familian this document is being filed met in that the corporation has been | d agent and agree to act in this capacity, of all statutes relative to the proper and complete with and accept the obligation of my position as registered rely to reflect a change in the registered office address, I n notified in writing of this change, | ŗ |
| | Sorporation System Agentife of Registated Agent | (24/2015) | _ |
| If signing on | behalf of an entity: | Jayna Nickell | |
| | | Asst. Secretary | |
| | Typed or Printed Name * * * F | ILING FEE: \$35.00 * * * | |
| | | <u>-</u> | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)