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CORPORATION SERVICE COMPANY: ACCOUNT NO. : I20000000195

REFERENCE : 256141 7889762

AUTHORIZATION _:

COST LIMIT

ORDER DATE: June 27, 2012

ORDER TIME : 2:59 PM

ORDER NO. : 256141-004

CUSTOMER NO: 7889762

CHANGE OF AGENT

NAME:

J.B.A. CONSULTING ENGINEERS,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organiz r to change its registered office or register	ed under the laws of the State of	Nevada
1. The name of t	he corporation: JBA CONSULTING E	NGINEERS, INC.	
2. The principal	office address: 5155 W. Pactrick Lane,	Las Vegas, NV 89118	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 05/01/2009	Document number: F09000	001802
	street address of the current registered age tment of State:	ent and registered office on file w	ith the
	NRAI Services, Inc.		_
	515 E. Park Avenue		
	Tallahassec, FL 32301		<u> </u>
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered of	ZOIZ JUN
	Corporation Service Company	S	18 L
	1201 Hays Street	;;;; ;;;;	
	(P.O. Box NOT acceptable) Tallahassee, FL 32301	O. O	DF 2
The street addre	ss of its registered office and the street as be identical.	ddress of the business office of i	م.
Such change wa authorized by th	is authorized by resolution duly adopted to board, or the corporation has been noti	by its board of directors or by an fied in writing of the change.	n officer so
May (Signatu	re of an officer or director)	Maureen Cathell, Vice Presi	
I further agree to of my duties, an document is being corporation has	the appointment as registered agent and o comply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change. on Service Cothpany	agree to act in this capacity. es relative to the proper and cor ation of my position as registere registered office address, I here	mplete performance ed agent. Or, if this eby confirm that the
By:	ace Con vibly	June 27, 2012	
	mature of Registered Agent)	(Date)	
	half of an entity:		
	y, Assistant Vice President yped or Printed Name)		

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