

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200306012392

11/27/17--01013--023 **35.00

S TALLENT NOV 2 8 2017

RIA-cut

17 NOV 27 PM 3: 42

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Meade Construction, Inc. Name of Corporation
DOCUMENT NUMBER:
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:
Christine Parker CFU Name of Contact Person
Meade Construction, Inc. Firm/Company
13 North Mill Street Address
Lexington, OH 44904 ——————————————————————————————————
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (740) 694-5525 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

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

TO:

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

i. The name of th	e corporation:	Meade Cons	truction, Inc.	
2. The principal o	ffice address: 1	3 North Mill Stree	et, Lexington, OH 4490	4
3. The mailing ad	dress (if different):			
4. Date of incorpo	ration/qualification: _	05/25/2012	Document number:	F1200000223
5. The name and s Florida Departr	street address of the cu ment of State: (If resig	urrent registered age med, enter resigned)	nt and registered office on f	ile with the
_	Swa	nk, Shelly		
_	12570	Metro Parkway		
_	Fort N	Myers, FL 33966		3 %_ 4
6. The name and s (if changed):		ew registered agent (if changed) and /or registere	ed office AHASSIF
_	3299	9 Hyacinth Drive		F(OR15)
	Nap	les, FL 34114-08	382	••
	of its registered offic	ce and the street add	dress of the business office	of its registered ager
The street address as changed will be	identical.			
				an officer so
Such change was authorized by the			Andrew L. Meade,	President/CEO
Such change was authorized by the Signature of	authorized by resolut board, or the corpora	ion duly adopted by tion has been notifi	its board of directors or by ed in writing of the change. Andrew L. Meade,	President/CEO

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