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## FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 6/30/14

NAME: NOASH CONSTRUCTION, INC

TYPE OF FILING: CHANGE OF AGENT

COST: 35.00

**RETURN:** PLAIN COPY PLEASE

ACCOUNT: FCA00000015

abbie

AUTHORIZATION: ABBIE/PAUL HODGE

## 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 <u>Kentucky</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation:		ASH CONSTRUCTION, INC.		
2. The principal office address: 11079 STATE ROUTE 132 EAST	SEBREE	КҮ	42455	
3. The mailing address (if different):	JEDREE			
P.O. BOX 249	SEBREE	KY	42455	
4. Date of incorporation/qualification: JUN	20, 2014 Document number:	F140000	02687	

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5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

-	JEFFER					
	155 OFFICE PLAZA DRIVE					
	TALLAHASSEE	FL	32301		•• بي ·	
The name and (if changed):	street address of the new registered age	nt (if changed) and /c	or registered of	fice .	JUN 30	
	National Corporat	e Research, Ltd.,	Inc.	•,	<u>ः</u> स्र	يىتىد ر مىرىدە
155 Office Plaza Drive P.O. Box NOT acceptable					: 29	
	Tallahassee	Florida	32301			

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 part or the part of the change.

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6.

JEFFERY V. PETTIT PRESIDENT Printed or typed name and title

6-30-14 Date

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.

Inclas

Signature of Registered Agen

If signing on behalf of an entity:

Bibfann Concelldi, Asst. Secty, National Corporate Research, Ltd.

Typed or Printed Name

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

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