Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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 MCCLURE ENGINEERING CO.

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COVER LETTER

⊙ 02/01/2021 12:29 PM+

TO: Amendment Section Division of Corporations

SUBJECT: McClure Engineering	ng Co.				
Name of Corporation					
DOCUMENT NUMBER: F 1700001	.984				
The enclosed Statement of Change of Registered Of	Tice/Agent and fee are submitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
Zachary Ysais	tter to the following:				
Name of Contact Person	1				
Registered Agent Solutions, Inc.					
Firm/Company	<u> </u>				
1701 Directors Blvd. Suite 300	E9:				
Address	FA T				
Austin, Texas 78744	[7] O.				
City/State and Zip Code	 				
E-mail address: (to be used for future annual rep					
Zachary Ysais	at (888) 705-7274 Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Dep	partment of State.				
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

→ 18506176380

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, unge is submitted for a corporati	on organize	d under the lav	vs of the State of $_$	lowa
	r to change its registered office of the Chara En			n, in ine state of r	ioriaa.
	the corporation: McClure En				<u> </u>
2. The principal	office address:			<u></u>	
	ddress (if different):				
1. Date of incorp	poration/qualification: 5/2/20:	17	Document r	number: F1700	0001984
	I street address of the current reg tment of State: (If resigned, ente	_	t and registere	d office on file wi	th the
	CORPORATION S	ERVIC	E COMP	ANY	
	1201 HAYS STREET			. •	•
	TALLAHASSEE		FL	32301-2525	-
6. The name and (if changed):	I street address of the new regist Registered Agent Se			d/or registered off	ice
	155 Office Plaza Dr		Suite A		•
	Tallahassee	P.O. Box NO FL	T acceptable 3230		
The street address changed will	ess of its registered office and the identical.	he street add	lress of the bu	siness office of it	s registered agent,
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	/ adopted by been notifi	tis board of ced in writing c	lirectors or by an of the change.	officer so
s/ Dan Du	y t	Da	an Duve		CFO
hereby accept further agree to fmy duties, an document is bei	the appointment as registered in the appointment as registered in comply with the provisions of all am familiar with and accepting filed merely to reflect a chain seen notified in writing of this	nye in ine ri	gree to act in s relative to th tion of my pos	ed or typed name and til this capacity, e proper and com ition as registered e address, I hereb	plete performanc Layent. Or. if thi
, , , , , , , , , , , , , , , , , , , ,	ansight -		02/01/2021		_
Sig	mature of Registered Agent			Date	
f signing on be	half of an entity:				
	Assistant Secretary	···-			
T;	yped or Printed Name *** FIL	ING FEE:	\$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)