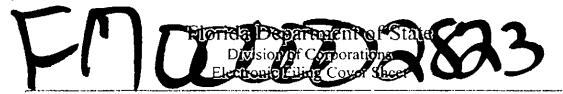
Division of Corporations



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(((H170003203173)))



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To:

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Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (512)418-6949 Fax Number : (954)208-0845 Fax Number

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

Email Address:

REGISTERED AGENT CHANGE GLUMAC ENGINEERING INC.

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COVER LETTER

Division of Corporations	
Glunne Engineering, Inc.	
SUBJECT: Name of Corporati	ion
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	
Name of Contact Pe	CD (19)
state of Conact to	13011
Firm/Company	
Address	
City/State and Zip C	ode .
Kimi,Suzuki@Tetratech.com	
E-mail address: (to be used for future an	nual report notification)
For further information concerning this matter, please call:	
Name of Contact Person at (
Name of Contact Person A	rea Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of	Contract to the second
Enclosed is a 303.00 check made payable to the Department of	State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
randidosee, i L ozo 14	Tallahassee, FL 32301
	· wirming (1 5 5 5 0)

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of California
in ord	er to change its registered office or registered agent, or both, in the State of Florida.
I. The name of	the corporation: Glumac Engineering Inc.
	office address: 910 Glenn Dr. Folsom, CA 95630
3. The mailing	address (if different): 900 SW Fifth Ave, Suite 1600, Portland, OR 97204
4. Date of incor	poration/qualification: 6/21/2017 Document number: F17000002823
5. The name an Florida Depa	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	National Registered Agents, Inc.
	1200 South Pine Island Road
	Plantation, FL 33324
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
·	- Col. 9
	c/o CT Corporation System, 1200 South Pine Island Road
	P.O. Box NOT acceptable Plantation, Florida 33324
	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s suthorized by resolution duly adopted by its board of directors or by an officer so calculated by the corporation has been notified in writing of the change.
Signatur	Richard A. Lemmon, Secretary e offer or director Printed or typed name and title
performance of agent. Or, if this	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Ву:	12/6/17
	tem By: Terrie Bates, Asst. Secy.
If signing on bel	palf of an entity:
C T Corporation	System
Ту	ped or Primed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)