F21000000 713

	equestor's Name)	
(RE	equestors Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #	
PICK-UP	■ WAIT	MAIL
(B)	usiness Entity Name)	
(Di	isiness Emily Harrie,	
	- M	
(DC	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	_
•	, and the second	"
		ı

Office Use Only



600367886066

EDME 2:- 01011--018 **FE.00

21 JUH 10 AT 8: 36

J DENNIS JUL 15 2021

COVER LETTER

TO: An	nendment Section vision of Corporations	į		
SUBJECT Name of C	: BUCKINGHAM CONSTRUCTION CORF	PORATION		
DOCUME	NT NUMBER: F21000000713			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please retu	rn all correspondence concerning this mai	tter to the following:		
Dena La Po	rta			
Name of C	ontact Person			
ZenBusines	is Inc.			
Firm/Comp	pany			
5511 Parkc	rest Drive, Suite 207			
Address				
Austin, TX	78731			
City/State	and Zip Code			
	fulfillment@zenbusiness.com			
E-mail add	dress: (to be used for future annual rep	ort notification)		
	-			
For further	information concerning this matter, pleas	e call:		
Dena La Po	rta	at (512) 237-7349		
	Name of Contact Person	at (512) 237-7349 Area Code & Daytime Telephone Number		
Enclosed is	s a \$35.00 check made payable to the Dep	artment of State.		
	Mailing Address:	Street Address:		
	Mailing Address: Amendment Section	Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.0502, 617.0502 statement of change is submitted for a corporation organi in order to change its registered office or registe	zed under the laws of the State of Indiana	nis 	
1. The name of the corporation: BUCKINGHAM CONSTI			
1. The name of the corporation:			
2. The principal office address: 941 N MERIDIAN ST INDIANAPOLIS, IN 46204			
3. The mailing address (if different):			
4. Date of incorporation/qualification: 02/04/2021	Document number: <u>F21000000713</u>		
5. The name and street address of the current registered as Florida Department of State: (If resigned, enter resigned			
ANGSTADT, LOUISE H			
207 RIDGE ROAD			
JUPITER, FL 33477			
6. The name and street address of the new registered agen (if changed):	t (if changed) and /or registered office		
Registered Agents Inc.			
7901 4th St N, STE 300			
P.O. Box	NOT acceptable		
St. Petersburg, FL 33702			
The street address of its registered office and the street as changed will be identical.			
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.	ı	
/s/ Nathaniel Stoops	Nathaniel Stoops, Director		
Signature of an officer or director	Printed or typed name and title		
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statu of my duties, and I am familiar with and accept the oblidocument is being filed merely to reflect a change in the corporation has been notified in writing of this change.	d agree to act in this capacity. Ites relative to the proper and complete perj gation of my position as registered agent. (registered office address, I hereby confirm	formance Or, if this 1 that the	
Bee 1	05-10-2021		_
Signature of Registered Agent	Date	-5	<u> </u>
If signing on behalf of an entity:			•
Bill Havre		0	
Typed or Printed Name		37	
* * * FILING FE	E: \$35.00 * * *	က က	Ç
Make checks payable to Flo Mail to: Division of Corporations, P.		٠٠٠ دس که	7
CR2E045 (04/13)			