(Requestor's Name)				
(Address)				
(Address)				
	(City/State/Zip/Phone #)			
PICK-UP	P WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
J. HORNE MAY-9 2023				

Office Use Only



2023 MAY -8 AH 9: 27

RECEIVED

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	: I2000000195				
REFERENCE	: 724337 8300861				
AUTHORIZATION	- xwell de man				
COST LIMIT	: (\$ 35.00				
ORDER DATE : May 5, 2023					
ORDER TIME : 8:27 AM					
ORDER NO. : 724337-005					
CUSTOMER NO: 8300861					
CHANGE OF AGENT					
NAME: ADCOCK CONSTRUCTION COMPANY					
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:				
CERTIFIED COPY					
XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weila	nd-sorenson				
EX	AMINER'S INITIALS:				

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	ADCOCK CONSTRUCTION (COMPANY					
		Name of Limited Liability Company					
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning	g this matter to the	following:				
Michae	el Clinton Adcock						
	Name of Person		_				
ADCO	CK CONSTRUCTION COMPANY						
	Firm/Company		<u> </u>				
11285	FM 2932						
	Address		<u> </u>				
FORN	EY, TX 75126						
	City/State and Zip Coo	de	_				
mikead	dcock@adcock-grp.com, yvonnethor	nas@adcock-grp.c	com				
E	-mail address: (to be used for future	annual report notif	fication)				
For fur	ther information concerning this mat	tter, please call:					
Yvonn	e Thomas	972 at (564-6522				
	Name of Person		Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the follow	ing amount:					
	□ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy				
INHS18	3 (2/14)						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	ame of the limited liability company: ADCOCK CON	ISTRUC	TION COMP	PANY
2. (a)			(b)	
	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		. ,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	11285 FM 2932		11285 FM	A 2932
	FORNEY, TX 75126		FORNEY	, TX 75126
	8/17/2022		F2200000	5256
3,	Date of filing/registration in Florida	— 4.		Document number
5. (a)	LAMBERT, JASON			
` ,	Registered Agent and Registered Office shown on the records of	the Flor	da Dept. of Stat	e:
	Registered Office Address (MUST BE FLORIDA STREET) 201 N. FRANKLIN ST. STE, 3050	ADDRE	<u>SS)</u>	_
		-		- 20 14.C. 20
	TAMPA	33602		23)
(b)	Enter name of NEW Registered Agent and/or NEW Registered			- 8 18 18 18 18 18 18 18 18 18 18 18 18 1
	Enter hance of MEW Registered Agent and/or NEW Registered	1 Ullice :	iddress:	A A
	Corporation Service Company			
	NEW Registered Office Address:			9. 27
	1201 Hays Street			~
	Tallahassee , FI	32301		
nange gent w vas/we ne artic	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liar e authorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of the registe ability of of the li- limited	e State of Flo red office and company, it is mited liability	orida, it is hereby confirmed that after the difference of the registered is hereby confirmed that the change(s) by company or as otherwise provided in spany.
/	ne of a member or authorized representative of a member			Printed or typed name of signee
ie obli mere otified	y accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I l in writing of this change.	ee to ac perforn d for in hereby c	t in this capa tance of my a Chapter 605 confirm that t	wity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed he limited liability company has been
ale	eary Welland-Soursen, AVP			
ngnatur	of Registered Agent			

COVER LETTER

TO: Registration Section Division of Corporations	
ADCOCK CONSTRUCTION COM	PANY
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Michael Clinton Adcock	
Name of Person	
ADCOCK CONSTRUCTION COMPANY	
Firm/Company	
11285 FM 2932	
Address	
FORNEY, TX 75126	
City/State and Zip Code	
mikeadcock@adcock-grp.com, yvonnethomas@	adcock-grp.com
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter, pl	ease call:
Yvonne Thomas	972 564-6522 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section	Street Address:
Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following an	rount:
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	