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To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 Phone : (561)508-5033

Fax Number : (561)694-1639

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

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REGISTERED AGENT CHANGE BECHTEL CONSTRUCTION OPERATIONS INCORPORATED

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

statement of ch in ord	hange is submitted for a corporation der to change its registered office or	17.0502, 607.1508, or 617.1508, Florida Statutes, t organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	his ———	
1 The name o	f the corporation: Bechtel Construction	on Operations Incorporated		
2. The principa Reston, VA 20	al office address: 12011 Sunset Hills F	Road, Suite 110		
3. The mailing	address (if different):			-
4. Date of incorporation/qualification: 01/29/1996 Document number: F96000000503			-	
5. The name a Florida Dep	and street address of the current regis partment of State: (If resigned, enter	tered agent and registered office on file with the resigned)		
	CT CORPORATION SYSTEM			
•	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION, FL 33324		SECO ALLA	2021 1
6. The name a		ed agent (if changed) and /or registered office	LAHASSEE	2021 HAY 27
	United Agent Group Inc.		FE S	
	801 US Highway I		물론	
	P.O. Box NOT ecceptable			0
	North Palm Beach, FL 33408			
The street ad as changed w	dress of its registered office and the vill be identical.	e street address of the business office of its registe	ered agent	ι,
Such change authorized by	was authorized by resolution duly to the board, or the corporation has t	adopted by its board of directors or by an officer speen notified in writing of the change.	\$ Q	
		Cierra Mims, Attorney-in-fact		
_	nature of all officer or director	Printed or typed name and title		
I further agree of my duties,		gent and agree to act in this capacity. all statutes relative to the proper and complete po the obligation of my position as registered agent, ge in the registered office address, I hereby confu change.	erformani Or, if th rm that th	ce is e
		05/27/2021		
	Signature of Regimered Agent	Date	•	
If signing on	behalf of an entity:			
Çierra Mims,	Special Secretary	_		
	Typed or Printed Name	•		

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

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