## F91000005594

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## TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Mark Hamilton Construction, Inc. (Name of construction)	orporation)
DOCUMENT NUMBER: F97000005594	
The enclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.
Please return all correspondence concerning this matter to the	he following:
Sabrina Tillapaugh (Name of	naman)
(Name of	persony
TIO O W T	
US CorpWorks Inc. (Name of firm	/company)
1638 Pennsylvania Street	
(Addre	ess)
Denver, CO 80203	<del></del>
(City/state and	d zip code)
For further information concerning this matter, please call:	
Sabrina Tillapaugh (Name of person)	at (303) 393.8800 (Area code & daytime telephone number)
(Name of person)	(Thea code at any and telephone namber)
Enclosed is a \$35.00 check made payable to the Departmen	t of State.
76 D. A. 77	Q
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations 409 E. Gaines Street
Tallahassee, FL 32314	Tallahassee, FL 32399

## FILE

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

Pursuant to the	provisions of sections 607.0502, 617.0502, 60	7.1508, or 617.1508, Florida Statutes, ti	his statement of
change is submi	itted for a corporation organized <mark>un</mark> der the lav	vs of the State of Texas	in order
to change its reg	gistered office or registered agent, or both, in t	the State of Florida.	
1. The name of	the corporation: Mark Hamilton Construct	on, Icn.	<del></del>
2. The principal	office address: 4200 FM 1128, Pearland,	X 77584	
3. The mailing a	address (if different): PO Box 1509, Manvel,	TX 77578	<del></del>
4. Date of incor	poration/qualification: 10/23/1997	Document number: F97000005594	
	d street address of the current registered agent rument of State:	and registered office on file with the	
	CT Corporation System		05,
	1200 South Pine Island Road		JAN-
	Plantation, FL 33324		Accept 1
6. The name and (if changed):	d street address of the new registered agent (if	changed) and /or registered office	AM 9: 31 UF STATE E. FLORIC
	NRAI Services, Inc.		A .
	526 E. Park Avenue		
	(P.O. Box or personal mailbo	x NOT acceptable)	•
	Tallahassee, FL 32301		
The street addre	ess of its registered office and the street addrest identical.	ess of the business office of its register	ed agent, as
Such change wathe board, or the	as authorized by resolution duly adopted by e corporation has been notified in writing of	its board of directors or by an officer s the change.	o authorized by
	Signature of an olincer or director)	Mark Hamilton, President	ile)
I hereby accept I further agree duties, and I an being filed mer	t the appointment as registered agent and ag to comply with the provisions of all statutes n familiar with and accept the obligation of i ely to reflect a change in the registered offic t writing of this change.	ree to act in this canacity.	•
<del></del>	(Signature of Registered Agent)	(Date)	··
If signing on be	ehalf of an entity.		
Michael Mirri		Assistant Secretary	
	(Typed or Printed Name)	(Capacity)	

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