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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 : (850)521-1000 Fax Number : (850)558-1515

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

Email Address:

REGISTERED AGENT CHANGE BOB MOORE CONSTRUCTION, INC.

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CR2E045 (8/05)

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Floridu Statutes, that among the state of Texas for the state of Texas for the change its registered office or registered ugent, or both, in the State of Florida.	ris
	f the corporation: BOB MOORE CONSTRUCTION, INC.	
2. The princips	al office address: 1110 N. Watson Rd., Arlington, TX 76011-3107	
3. The mailing	address (if different):	
4. Date of inco	prporation/qualification: 03/30/1998 Document number: F98000001808	
	nd street address of the current registered agent and registered office on file with the artment of State:	
	C T Corporation System	
	1200 South Pine Island Road	
	Plantation, FL 33324	
6. The name a (if changed)	nd street address of the new registered agent (if changed) and /or registered office Corporation Service Company	
	1201 Hays Street	<i>3</i> "
	(P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	
The street add	tress of its registered office and the street address of the business office of its register ill be identical.	red agent,
-	was authorized by resolution duly adopted by its board of directors or by an officer s the board, or the composation has been notified in writing of the change.	ю.
Thu	Maureen Cathell, Attorney in Fact (Printed or typed name and inte)	—
I hereby acces I further agre of my duties, i document is b corporation h	pt the appointment as registered agent and agree to act in this capacity, e to comply with the provisions of all statutes relative to the proper and complete pe and I am familiar with and accept the obligation of my postiton as registered agent eing filed merely to reflect a change in the registered office address, I hereby confirms been notified in writing of this change.	rformance Or, if this m that the
By: Si	Signature of Regiments Agent) (Drie)	
If signing on	behalf of an entity;	
Sylvia Quep	ppet, Asst. Vice President	
	(Typed or Printed Name)	
	* * * FILING FEE: \$35.00 * * *	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahasser, FL 32314

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