Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195 Phone

: (850)521-1000

Fax Number

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## REGISTERED AGENT CHANGE L.B. FOSTER COMPANY

Certificate of Status	0
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Page Count	02
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Corporate Filing Merel COU

NOV 2 4 2009

**EXAMINER** 

CR2E045 (8/05)

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

statement of	the provisions of sections 607.0502, 617.0502, f change is submitted for a corporation arganiza	ed under the laws of the State o	<u> Pennsylvania</u>			
	order to change its registered office or register	_	f Florida			
1. The name	e of the corporation: L.B. FOSTER COM	IPANY				
2. The princ	cipal office address: 415 Holiday Dr., Pit	tsburgh PA 15220				
3. The maili	ing address (if different):					
4. Date of in	ncorporation/qualification: 06/22/1998	Document number: F980	000003536			
	e and street address of the current registered age repartment of State:	nt and registered office on file	with the			
	NRAI Services, Inc.					
	2731 Executive Park Dr., Ste. 4					
	Weston, FL 33331					
6. The name (if change	e and street address of the new registered agent ed):	(if changed) and /or registered (	NOV 23			
	(P.O. Box NOT acceptable)		- 55 5			
	Tallahassee, FL 32301					
The street as changed	address of its registered office and the street ad will be identical.	ldress of the business office of	fics registered agent,			
Such chang authorized	e was authorized by resolution duly adopted he by the board, or the corporation has been notified.	by its board of directors or by field in writing of the change.	an officer so			
· //S	Sections of an officer or director)	Pavipl Vol-	tz V.P.			
I hereby according to the second of my duties document is corporation	cept the appointment as registered agent and ree to comply with the provisions of all statutes, and I am familiar with and accept the obligs being filed merely to reflect a change in the statutes has been notified in writing of this change. oration Service Company	agree to act in this capacity, es relative to the proper and c ation of my position as registe registered office address, I had	omplete performance red agent. Or, if this reby confirm that the			
By:54		11/16/2 (Date)	<u>667</u>			
If signing o	n behalf of an entity:					
Sylvia Q	(Typod or Printed Name)					
	* * * RILING REE	: \$35.00 * * *				

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MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314