

F98000004321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

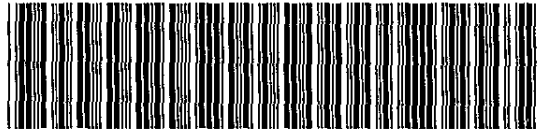
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200057580222

07/25/05--01010---000 **35.00

FILED

05 JUL 25 PM 3:40

CLERK OF STATE
TALLAHASSEE, FLORIDA

Ps 7/25/05
R1/120



FILING TRANSMITTAL FORM

TO: Division of Corporations
Florida Department of State
409 E. Gaines Street
P. O. Box 6327
Tallahassee, FL 32314

FR: Gary Sherman
DATE: July 18, 2005

RE: CUH2A, Inc. Architecture Engineering Planning

PLEASE FILE THE ATTACHED

Change of Registered Agent

A Check for the \$35 filing fee is enclosed.

PLEASE OBTAIN THE FOLLOWING EVIDENCE: One filed stamped copy

Please call Gary Sherman at 800-300-5067 if there are any problems with this filing.

Please Return Evidence By Regular Mail to:
Gary Sherman
CONTINENTAL CORPORATE SERVICES, INC.
189 FRANKLIN AVENUE, SUITE 1
NUTLEY, NJ 07110
PHONE: 800-300-5067
FAX: 973-542-0313

Thank you.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CUH2A, Inc. Architecture Engineering Planning
(Name of corporation)

DOCUMENT NUMBER: F98000004321

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GARY SHERMAN

(Name of person)

Continental Corporate Services, Inc.

(Name of firm/company)

189 Franklin Avenue, Suite 1

(Address)

Nutley, NJ 01770

(City/state and zip code)

For further information concerning this matter, please call:

GARY SHERMAN

(Name of person)

at (800) 300-5067

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New Jersey in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CUH2A, Inc. Architecture Engineering Planning
2. The principal office address: 1000 Lenox Drive, Lawrenceville, NJ 08648
3. The mailing address (if different): CN 5380, Princeton, NJ 08543-5380
4. Date of incorporation/qualification: July 29, 1998 Document number: F98000004321
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

(P.O. Box or personal mailbox NOT acceptable)

Weston, FL 33331

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Jeffrey P. Hlesciak
(Signature of an officer or director)

Jeffrey P. Hlesciak, Secretary
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

NRAI Services, Inc.

by: [Signature]

(Signature of Registered Agent)

July 15, 2005
(Date)

If signing on behalf of an entity:

GARY SHERMAN
(Typed or Printed Name)

ASSISTANT SECRETARY
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314