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(Re	equestor's Name)	·········		
(Ad	ldress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	· #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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R.A. Address Change

COVER LETTER

TO:	Amendment Section Division of Corpora		•	
SUBJE	rct.	Nelson Architectura	al Engineers, Inc.	
SCDJI		(Name of Co	orporation)	
DOCU	MENT NUMBER:_	F99000003589	· · · · · · · · · · · · · · · · · · ·	
The en	closed Statement of C	hange of Registered Office	Agent and fee are submitted for filing.	
Please	return all corresponde	ence concerning this matter	to the following:	
	·	,		
		Clayton .		
	-	(Name of Con	tact Person)	
			•	
Nelson Architectural Engineers, Inc. (Firm/Company)				
		(Firm/Col	mpany)	
		520 Wekiya Co	ommons Circle	
520 Wekiva Commons Circle (Address)				
Apopka, FL 32712				
		(City/State and	d Zip Code)	
For fur	ther information conc	erning this matter, please ca	all:	
	Clayton	J. Lee	at (407) 590-5031	
		ntact Person)	at (407) 590-5031 (Area Code & Daytime Telephone Number)
Enclose	ed is a \$35.00 check r	nade payable to the Departi	ment of State.	
	Ma A	iling Address: endment Section	Street Address: Amendment Section	
		ision of Corporations	Division of Corporations	
		Box 6327	Clifton Building	
	Tal	lahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

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 Status statement of change is submitted for a corporation organized under the laws of the State of Floria in order to change its registered office or registered agent, or both, in the State of Floria	lorida	
1. The name of the corporation: Nelson Architectural Engineers, Inc.		
2. The principal office address: 2740 Dallas Parkway, Suite 220		
Plano, TX 75093		· · · · · · · · · · · · · · · · · · ·
3. The mailing address (if different):		
4. Date of incorporation/qualification: <u>07/06/1999</u> Document number: <u>F9900000356</u>	89	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	?	
Clayton J. Lee		
2755 Border Lake Road, Suite 103		
Apopka, FL 32703	2008	
6. The name and street address of the new registered agent (if changed) and /or registered officer (if changed):	2008 JAN - 7	TI M
Clayton J. Lee	Y OF	
520 Wekiva Commons Circle	PM 12: 55	ري
(P.O. Box NOT acceptable)	in G	
Apopka, FL 32712		
The street address of its registered office and the street address of the business office of its reg as changed will be identical.	istered age	ent,
Such change was authorized by resolution duly adopted by its board of directors or by an offic authorized by the board, or the corporation has been notified in writing of the change.	er so	
Eich Nelson Presi (Signature of an officer or director) Erik L. Nelson Presi (Printed or typed name and title)	dent	_
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 of my duties, and I am familiar with and accept the obligation of my position as registered age document is being filed merely to reflect a change in the registered office address, I hereby concorporation has been notified in writing of this change.		nce this the
Con 12/2/07		
(Signature of Registered Agent) (Date)	,	
If signing on behalf of an entity:		
(Typed or Printed Name)		

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

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