Division of Corporations Electronic Filing Cover Sheet

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(((H12000292453 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

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

Email Address:

REGISTERED AGENT CHANGE SPALJ CONSTRUCTION COMPANY

Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

12/13/2012

https://efile.sunbiz.org/scripts/efilcovr.exe

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CT CORPORATION

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12/13/2015 12:20

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJ	Spalj Construction Company			
	Name of Corporation			
DOC	F99000003740 UMENT NUMBER:			
The er	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	Name of Contact Person			
	THE OF CASIMELS AS ASS.			
	Firm/Company			
	Address			
	City/State and Zip Code			
•				
	E-mail address: (to be used for future annual report notification)			
For fu	ther information concerning this matter, please call:			
<u> </u>	Name of Contact Person at () Area Code & Daytime Telephone Number			
	Name of Contact Person Area Code & Daytime Telephone Number			
Enclos	ed is a \$35.00 check made payable to the Department of State.			
	Malling Address: Street Address: Amendment Section Amendment Section			
	Division of Corporations Division of Corporations			
	P.O. Box 6327 Clifton Building			
	Tallahassee, FL 32314 2661 Executive Center Circle			
	Tallahassee, FL 32301			

CR2E045 (03/12)

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

statement of cha	nge is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of <u>DE</u> red ogent, or both, in the State of Florida.	
1. The name of t	he corporation; Spalj Construction Compan	у	
2. The principal	office address: 22360 COUNTY ROAD 12	DEERWOOD MN 56444	
3. The mailing a	ddress (if different): 2800 POST OAK BL	D SUITE 2600 HOUSTON TX 77056	
4. Date of incorp	poration/qualification: 07/21/1999	Document number: F99000003740	
	street address of the current registered ag tment of State: (If resigned, enter resigned		
	CORPORATION SERVICE COMPANY		
	1201 HAYS STREET	SEC.	
	TALLAHASSEE FL 32301	AH CC F	
6. The name and (if changed):	street address of the new registered agen	FI'S	
	C T Corporation System	ORIBE OR	
c/o C T Corporation System, 1200 South Pine Island Road			
	P.O. Box NOT: Plantation, Florida 33324	цссерlable	
The street addre	ss of its registered office and the street a be identical.	ddress of the business office of its registered agent,	
		by its board of directors or by an officer so fied in writing of the change.	
_EM	Xt Dala	Kristin Bolden, Secretary	
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm	the appointment as registered agent and a comply with the provisions of all statu my dulies, and I am familiar with and ac s dacument is being filed merely to refle that the corporation has been notified in	Printed or typed name and table agree to act in this capacity. tes relative to the proper and complete cept the obligation of my position as registered ct a change in the registered office address, I writing of this change.	
	orporation System	12/05/2012	
Sign	sature of Registered Agent	Date	
If signing on bel	•		
	A. Halpin Secretary————————		
, <u>- 15</u>	Secretary pod or Printed Name * * * FILING FEI	E: \$35.00 * * *	

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

FL006 - 10/25/2012 Wolton Kluwer Online

CR2E045 (03/12)