

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

யு£்குail Address:

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 future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE BENHAM CONSTRUCTORS, LLC

 Certificate of Status
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 Certified Copy
 0

 Page Count
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 Estimated Charge
 \$35.00

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				•			
SUBI	ECT:	BENHAM (CONSTR	UCTORS,	LLC		_	
	Name	of Limite	d Liabi	lity Com	pany		_	
Dear :	Sir or Madam:							
The e	nclosed Registered Agent/Register	ed Office	Change	and fee(s) are submitted for filing.			
Pl c ase	return all correspondence concern	ning this n	natter to	the follo	wing:			
	Leslie French							
<u> </u>	Name of Person					,		
	Science Applications International C	corporation	·		2		09	
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	10260 Campus Point Drive	e			(n			r
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	San Diego CA 92121 City/State and Zip Code		,	—	25 E	>	O	
	Chyrodia and 21p Code				DA	77	7	
E-	lealie.c.french@saic.com mail address (to be used for future annual rep	part notificati	on)					
For fu	ther information concerning this r	natter, ple	ase call	;				
	Jensica Hale	at (213)	337-4611			
	Name of Person			Area Code i	L Daytime Telephone Number	_		
	STREET/COURIER ADDRESS:				DDRESS:			
Registration Section			Registration Section					
Division of Corporations Clifton Building 2661 Executive Center Circle			Division of Corporations P.O. Box 6327					
			Tallahassoc, Florida 32314					
	Tallahassee, Florida 32301		,-					
	Enclosed is a check for the follo	wing amo	ent:					
{	\$25 Filing Fee		S5	5 Filing I	Fee & Certified Copy			
MINELE	(6/09)							

FL015 - 03/07/2009 C T System Online

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. Name of the limited liability company: BENHAM CONSTRUCTORS, LLC 2. (a) Principal office address of limited liability company: (Note: MUST_BE STREET ADDRESS) 9400 NORTH BROADWAY OKLAHOMA CITY OK 73114 (b) Mailing address of limited liability company; Note: MAY BE POST OFFICE BOX 11/05/2004 M04000004827 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 Registered Office Address: WESTON FL 33331 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: C T Corporation System **NEW** Registered Office Address: 1200 South Pine Island Road MUST BE FLORIDA STREET ADDRESS) Plantation. If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. cooper Signature of member or authorized representative of a member Jessica Hale Printed or typed name of signee 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 auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the similed liability company has been notified in writing of this change.

> Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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Signature of Registrica Alexand