| (Re | questor's Name) | |
|---|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
| | | .] |
| | | |
| | | |
| | | |

G. MCLEOD

MAY 11 2011

EXAMINER



600207368016



ORATION SERVICE COMPANY"

ACCOUNT NO. : 12000000195

REFERENCE : 768710 7630099

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : May 5, 2011

ORDER TIME : 10:10 AM

ORDER NO. : 768710-010

CUSTOMER NO: 7630099

CHANGE OF AGENT

NAME: MAGELLAN CONSTRUCTION, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS:

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: | MAGELLAN CONSTRUCTION, L.L.C. |
|---|---|
| 2. (a) Principal office address of limited lial (Note: MUST BE STREET ADDR. | bility company: 111 Jersey Drive ESS Youngsville, LA 70592 |
| (b) Mailing address of limited liability co | ompany: |
| January 31, 2008 | M08000000527 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Off | fice shown on the records of the Florida Dept. of State: |
| Registered Agent: | Contega Business Services, LLC |
| Registered Office Address: | One Independent Drive, Suite 1200 Jacksonville, FL 32202 |
| | ant and/or NEW Registered Office address: |
| NEW Registered Agent: | Corporation Service Company |
| NEW Registered Office Address: (MUST BE FLORIDA STREET AD | DRESS) 1201 Hays Street Tallahassee ,FL 32301 |
| that after the change or changes are made, the | zed under the laws of the State of Florida, it is hereby confirmed e Florida street address of the registered office and the business l. Or, in the case of a Florida limited liability company, it is re authorized by an affirmative vote of the members of the limited in the articles of organization or the operating agreement of the |
| Andre Hebert, Member (Printed or typed name of signee) | ************************************** |
| DY. | ed agent and agree to act in this capacity. I further agree to ative to the proper and complete performance of my duties, and I of my position as registered agent as provided for in Chapter 608, rely reflect a change in the registered office address, I hereby s been notified in writing of this change. Jeanine Reynolds |
| (Signature of Registered Agent) Grace E. Kirby, A | |
| Division of Corporation | ons, P.O. Box 6327, Tallahassee, FL 32314 |

FILING FEE: \$25.00