## M09000003135

(Requestor's Name)			
(Address)			
(Address)			
(City	//State/Zip/Phone	e #)	
' PICK-UP	WAIT	MAIL	
* (Bus	iness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



800198734648

03/22/11--01032--009 \*\*25.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

MAR 2 8 2011

**EXAMINER** 

## COVER LETTER .

TO: Registration Section Division of Corporations				
UBJECT: Hawkeye Utility Construction, LLC  Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.			
Please return all correspondence concerning thi	s matter to the following:			
Angela Gawlinski				
Name of Person				
NRAI Corporate Services Firm/Company				
200 West Adams, Suite 2007  Address				
Chicago, IL 60606 City/State and Zip Code				
alice.garza@willbros.com  E-mail address: (to be used for future annual report notifi	ication)			
For further information concerning this matter,	please call:			
Angela Gawlinski a	t ( 312 ) 346-2606  Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
\$25 Filing Fee	\$55 Filing Fee & Certified Copy			

## 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: Hawkeye Utility Construction, LLC		
	2. (a) Principal office address of limited liability company	y: 100 Marcus Boulevard	
	(Note: MUST BE STREET ADDRESS)	Hauppauge, NY 11788	
	(b) Mailing address of limited liability company:	100 Marcus Boulevard	
	(Note: MAY BE POST OFFICE BOX)	Hauppauge, NY 11788	
	8/13/2009	M0900000313-5	
	3. Date of filing/registration in Florida	4. Document number	
	5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
	Registered Agent:	C T Corporation System	
	Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
	NEW Registered Agent:  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NRAI Services, Inc. 515 East Park Avenue	
		Tallahassee ,FL32301	
	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 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.		
	Lori Pinder	ORPC	
by:	I hereby accept the appointment as registered agent and agree to act in this capacity. I furthe agree to comply with the provisions of all statutes relative to the proper and complete performance of in duties, and I am familiar with and accept the obligations of my position as registered agent as provided for Chapter 608, F.S. Or lif this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.		
	EILING EEE.	·	