

M101202000845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____

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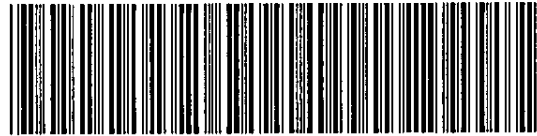
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OCT 11 2011

EXAMINER



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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 OCT 11 AM 11:04



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 933916 7750155

AUTHORIZATION

COST LIMIT

\$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT 11 AM 11:04

ORDER DATE : October 4, 2011

ORDER TIME : 9:49 AM

ORDER NO. : 933916-008

CUSTOMER NO: 7750155

CHANGE OF AGENT

NAME: HINKLE CONTRACTING COMPANY,
LLC

PLEASE RETURN THE FOLLOWING AS PER ORDER OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS: _____

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

Pursuant to the provisions of sections 608.41 or 608.50, 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: HINKLE CONTRACTING COMPANY, LLC

2. (a) Principal office address of limited liability company
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company
(Note: **MAY BE POST OFFICE BOX**)

02/23/2010

3. Date of filing/registration in Florida

5. (a) Registered Agent and Registered Office shown on

Registered Agent:

Registered Office Address:

(b) Enter name of NEW Registered Agent and/or NEW

NEW Registered Agent:

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change(s) was/were authorized by 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.

(Signature of a member or authorized representative of a member)

ANTHONY KEENAN

(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 the provisions of all statutes relating to the performance of my duties, 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 limited liability company has been notified in writing of this change.

By: Sylvia Queppet

(Signature of Registered Agent) Sylvia Queppet, Asst. VP

Division of Corporations, P.O. Box 127, Tallahassee, FL 32314
FILING FEE 25.00

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

Pursuant to the provisions of sections 608.41 or 608.50, 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: HINKLE CONTRACTING COMPANY, LLC

2. (a) Principal office address of limited liability company
(Note: **MUST BE STREET ADDRESS**)
395 N. Middletown Rd.
Paris, KY 40361

M10000000845

Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: CT Corporation System

Registered Office Address: 1200 South Pine Island Road
Plantation FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

201 Hays Street

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change(s) was/were authorized by 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.

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to the provisions of all statutes relating to the performance of my duties, 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 limited liability company has been notified in writing of this change.

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