M13000000421

(Re	equestor's Name)	· · · · ·				
(Ad	dress)					
(Ac	ldress)					
(Cit	ty/State/Zip/Phone i	‡)				
PICK-UP	☐ WAIT	MAIL ,				
(Bu	siness Entity Name)				
(Do	ocument Number)					
Certified Copies	Certificates o	of Status				
Special Instructions to Filing Officer:						
y	Office Use Only					



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11/10/14=-01039--004 **25.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

To the specification of the second

T. LEWIEUX



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper acasper5@cscinfo.com

Date: November 7, 2014

Order#: 367571-027

Re: S&N LOCATING SERVICES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company:	S&N LOCATING	SERVI	CES, LLC		
2.	(a)	Principal office address of finited lin (Note: MUST BE STREET A		_ (b)	Λ	Mailing address of limited liab	
		Kernersville, NC 27284		-			,
•		04/16/2013			M130000		
3,		Date of filing/registration in	1 Florida	4.		Document number	
5.	(a)	C T Corporation System				•	
		Registered Agent and Registered Office show	wn on the records of th	e Florida	Dept, of State	;	
		Registered Office Address (MUST BE F	CLOPIDA STREET AL	DD B B C C			-i4 .
		 			14 NOV 10 SECRETAR TALLAHASS		
		1200 South Pine Island Road				•	CREE AN
		Plantation	, FL_	33324			ASS
			,			ť	m~
	(b)	/ 					AH 3: OF ST. E, FL
		Enter name of NEW Registered Agent and	or NEW Registered C	Office add	iress:		3: 38 F STATE FLORID
		1201 Hays Street					Diri B
		NEW Registered Office Address:					
		Tallahassee		32301			
the ago wa	char ent w s/we	mited liability company is not organing or changes are made, the Florida vill be identical. Or, in the case of a re authorized by an affirmative vote cles of organization or the operating	ized under the laws street address of the Florida limited liab of the members of	s of the he regis pility co	tered office inpany, it is ited liability ability com	e and the business office is hereby confirmed that to y company or as otherwing pany.	of the registered the change(s)
	•	/ m			George	c Baer	
	٠.	urg of a member or authorized representative			•	Printed or typed name of sig	
pro the to no	ovisio obli mere tifica	ny accept the appointment as register ons of all statutes relative to the properties of all statutes relative to the properties of the properties of the properties of the registered in writing of this change.	per and complete p ugent as provided office address, I he	erforma for in C ereby co	ince of my i hapter 605 infirm that i	dules, and I am familiar; F.S. Or, if this docume the limited liability comp	willi and accept ent is being filed oany has been
Si	gnatuf	e of Hogistered Agent Corporation Ser	vice Company	BY: S	ytvia Quep	opet, Assistant Vice Pro	esident