## M14 00000 8885

(Requestor's Name)			
(Address)	2003048		
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL	10/25/17010		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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J. HARRIS



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Allison Lynn ashley.jiminez@cscqlobal.com

Date: October 23, 2017

Order#: 876099-058

Re: UCI CONSTRUCTION SERVICES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Allison Lynn

c/o Corporation Service Company

251 Little Falls Drive 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.

I. Na	me of the limited liability	company: <u>UCLCONSTRU</u>	CHON S	ERVICES, L	.LC	<u> </u>
2. (a)		of limited liability company:  STREET ADDRESS)	(b)	M	STH AVE.  ailing address of limited (Note: MAY BE POST	
	TAMPA	FL 33619	<del>-</del> -	TAMPA, F	L 33619	
	12/11/2014			M14000008	8885	
3.	Date of filing/reg	istration in Florida	4,	ľ	Document number	
5 (a)	SCHLEMMER TODD	W				
5. (a)		1 Office shown on the records of t	he Florida	Dept. of State:		
	7103 E. 6TH AVENUE			•		
		MUST BE FLORIDA STREET A	(DDRFSS)	<del></del>		
	<u></u>	TOBY DO TO THE PARTY OF THE PAR	12171111007			
i	TAMPA	, FL	33619		•	3 ° 1. 2017 OCT
						7 0
(b)	Corporation Service Com	pany				
` '	Enter name of NEW Registered	Agent and/or NEW Registered	Office add	ress		OI (
	1201 Hays Street					Die CN
	NEW Registered Office Addres	is:				(5)
					~··	<b>C</b> .77
	<del></del>					
	Tallahassee	, FL	32301			
the cha agent w was/we	nge or changes are made, the fill be identical. Or, in the tre authorized by an affirmation	not organized under the law he Florida street address of case of a Florida limited lia ative vote of the members of operating agreement of the	the registability confirmation from the limited li	ered office a npany, it is l ted liability	and the business offi hereby confirmed the company or as other pany.	ce of the registered at the change(s)
Signat	ure of meruber or authorized re	presentative of a member	3111 C		Printed or typed name of	signee
I herel	by accept the appointment of some of all statules relative to the statules relative to the statules of the statules in the relative to the statules of this charge.	as registered agent and agr. o the proper and complete egistered agent as provided egistered office address, Fl. ation Scrvice Company	performa I for in C iereby co	in this capac nce of my di hapter 605, nfirm that th	rity I further agree	to comply with the iar with and accept ment is being filed mpany has been

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