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Da	ite:	12/17/2024	- will DW
		Acc#I20160000072	
Name:	ENGINEER	ING ASSOCIATES, L	_LC
Document #:	. <u>.</u>		
Order #:	16040153-2	36	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified: Plain: COGS:		Email Address for Annual Report Notifications
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Thank you!

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the Florida Department of
State: ENGINEERING ASSOCIATES, LLC	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
2. The Florida document number of this limited lia	bility company is: M15000006207
4. Date authorized to do business in Florida: 08/05	5/2015
SECTION II (5-9 complete only the applicable of	changes)
5. New name of the limited liability company: (must	contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mai must contain "Limited Liability Company," "L.L.C	for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name C." or "LLC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office ac	ed officer address on our records, enter the name of the new ddress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida Street Address
	City Zip Code
the provisions of all statutes relative to the proper	nt and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with tered agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited
— If C	Changing Registered Agent, Signature of New Registered Agent

8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:					
itle/ Capacity	<u>Name</u>	Address	Type of Action		
Manager	Kevin M. Wetherington	11780 US Highway 1, Ste 600	⊠Add		
		Palm Beach Gardens, FL 33408-3043	□Remo		
Manager	H. Andrew DeFerrari	11780 US Highway 1, Ste 600	🖪 Add		
	Palm Beach Gardens, FL 33408-3043	□Remo			
Member Dycom Investments, Inc.	11780 US Highway 1, Ste 600				
	Palm Beach Gardens, FL 33408-3043	□Remo			
Manager Steven E. Nielsen	11780 US Highway 1. Ste 600	□∧dd			
	Palm Beach Gardens, FL 33408-3043	⊡ Remo			
		□Add			
aforementic	under the law of which this entity	cated by the official having custody of records in the	□Remo		
	Signa	nture of the authorized representative			

Filing Fee: \$25.00