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(Re	questor's Name)	<u></u>
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
	WAIT	MAIL
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	ACCOUNT NO.	:	12000000195
	REFERENCE	:	022675 8393407
	AUTHORIZATION	:	Aller A. C.
	COST LIMIT	:	\$ 25.00
ORDER DATE :	October 12, 2022		
ORDER TIME :	8:51 AM		
ORDER NO. :	022675-003		
CUSTOMER NO:	8393407		

CHANGE OF AGENT

NAME: DOOR CREEK CONSTRUCTION OF ILLINOIS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

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. N	ame of the limited liability company:	EEK CONS	TRU		DF ILLINOIS, L	LC		
(,	Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>)		(b)					
	2205 KIMBERLY ROAD - OFFICE			2205 KIM	IBERLY ROAD	D - OFFIC	E	
	BETTENDORF, IA 52722		-	BETTENI	DORF, IA 527:	22		
	04/24/2017		M	1700000	3532			
3.	Date of filing/registration in Florida	4.	_		Document nu	mber		
5. (a)								
<i>J</i> . (u)	Registered Agent and Registered Office shown on the record	ds of the Flori	da D	Dept. of State	_ e:			
	INCORP SERVICES, INC.							
	Registered Office Address (MUST BE FLORIDA STR	<u>EET ADDRE:</u>	<u>SS)</u>		_			
	17888 67TH COURT NORTH					r *	20	
	LOXAHATCHEE	, FL 33470			_		2022 OCT	
		_					i 	بر در با د ۲۰۰
(b)					-			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>	stered Office a	<u>ıddr</u>	<u>ess</u> :			AH	
	Corporation Service Company						မှု အ	
	NEW Registered Office Address:	·			_	mi	СТ	
	1201 Hays Street				_			
	Tallahassee	FL_32301						
change agent v was/v the art Signa	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the memb- idles of organization or the operating agreement of the operating agreement of a member or authorized representative of a member	f the registe ed liability c ers of the lin f the limited 	red com mite lial Cil	office and pany, it is ed liability bility com mi, Autho	d the business s hereby confin y company or apany. prized Person Printed or typed	office of the office office office of the office of the office of	the reg the cha ise pro	istered ange(s) wided in
provisi the obi to mer	by accept the appointment as registered agent and ions of all statutes relative to the proper and comp ligations of my position as registered agent as pro- ely reflect a change in the registered office addres. I in writing of this change	l agree to ac lete perforn vided for in s. I hereby c	nan Che conf	ce of my a apter 605 firm that t	duties, and I and F.S. Or, if th the limited liab	m familiar jis docum bility comp	" with i ent is t pany h	y with the and accept being filed as been
. <u> </u>	Indee L. M. O. L.	-	<u>Gr</u>	ace E. Ki	rby, Asst Vice	Presiden	<u>t</u>	
J. E. Gard		0 D (11		7 . 11 ·				
	Division of Corporations• P. FILIN	:O. Box 632 IG FEE: <mark>\$</mark> 2			ssee, FL 3231-	+		

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