P0200073451

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COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJ	ECT: DURA-STRESS UNDERGROUN (Name of C	ND, INC.	
DOCU	JMENT NUMBER: P02000072451		
	nclosed Statement of Change of Registered Office	re/Agent and fee are submitted for filing.	
	return all correspondence concerning this matte	•	
	DEL G. POTTER		
	(Name of Co	ntact Person)	
	POTTER, CLEMENT, LOWRY	'& DUNCAN	
(Firm/Company)			
308 EAST FIFTH AVENUE (Address)			
	(Aut	11655)	
	MOUNT DORA, FLORIDA 3275		
	(City/State a	nd Zip Code)	
For fu	rther information concerning this matter, please	call:	
DEL (3. POTTER	at (352) 383-4186 (Area Code & Daytime Telephone Number)	
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclos	sed is a \$35.00 check made payable to the Depar	tment of State.	
;	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of FLORIDA r to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of t	he corporation: DURA-STRESS UNDERGROUND, INC.		
2. The principal	office address: 11043 CR 44E, LEESBURG, FLORIDA 34788		
3. The mailing a	ddress (if different): PO BOX 350729, GRAND ISLAND, FLORIDA 32735		
4. Date of incorporation/qualification: JULY 1, 2002 Document number: P02000072451			
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:			
	SCOTT M. EDWARDS		
	4511 LASALLE AVENUE SOUTH		
	ST. CLOUD, FLORIDA 34772		
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office		
	DEL G. POTTER		
	308 EAST FIFTH AVENUE		
	(P.O. Box NOT acceptable) MOUNT DORA, FLORIDA 32757		
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.		
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so board, of the corporation has been notified in writing of the change.		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	G. KENT FULLER, PRESIDENT (Printed or typed name and title)		
I further agree i of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.		
- 1 In	relative of Registered Agent) 7 / 17 / 200 8 (Date)		
If signing on behalf of an entity:			
	yped or Printed Name)		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *