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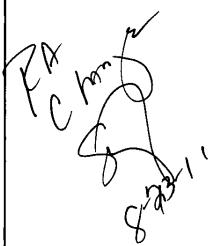
(Requestor's Name)					
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COVER LETTER

TO:		ent Section of Corporations			
SUBJ	ECT:	American Eng	gineers & Cor Name of Corpora	ntractors, Inc	
DOCI	JMENT NU	JMBER:	P060000	43501	
The en	closed State	ement of Change of Regis	stered Office/Agen	t and fee are submi	tted for filing.
Please	return all co	orrespondence concerning	g this matter to the	following:	
			Shiv Shahi		
		1	Name of Contact Po	erson	
		American	Engineers & Co	entractore Inc	
		Amendan	Engineers & Co		
			1. 2		
		500 Village	e Square Cross	ing, Suite 203	
			Address		
		Palm B	leach Gardens, City/State and Zip (FL 33410	
			ity/State and Zip (Coue	
	_	st	niv@AECbuild.c	om_	
		E-mail address: (to be	used for future a	nnual report notif	ication)
. .					
For fur	ther informa	ation concerning this mat	ter, please call:		
		Shiv Shahi	at (561 ₎	889 6621
	Nai	ne of Contact Person	7	Area Code & Daytir	me Telephone Number
Enclose	ed is a \$35.0	00 check made payable to	the Department o	f State.	
		Mailing Address: Amendment Section Division of Corpo P.O. Box 6327	orations	Street Address: Amendment Se Division of Co Clifton Buildin	rporations g
		Tallahassee, FL 3	2314	2661 Executive Tallahassee, FI	

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 nge is submitted for a corporation organized under the t r to change its registered office or registered agent, or b	laws of the State of	Florida	
	he corporation: American Engineers & Con	·	rioriaa.	
2. The principal	office address: 500 Village Square Crossing, St	uite 203		
Palm Beac	ch Gardens, FL 33410		,	
3. The mailing a	ddress (if different):		,	
4. Date of incorp	poration/qualification: 03/27/2006 Documen	nt number:F	P06000043501	
	street address of the current registered agent and registe tment of State: (If resigned, enter resigned)	ered office on file wi	ith the	
	4400 NorthCorp Parkway		_	
	Palm Beach Gardens, FL 33410			
				iya * #Res
6. The name and (if changed):	street address of the new registered agent (if changed) a	md 7 or registered of	fice Fig.	
	500 Village Square Crossing, Suite 203			
	Palm Beach Gardens, FL 33410		- 5 3 3 22	
	P.O. Box NOT acceptable		_	
The street addre as changed will	ss of its registered office and the street address of the be identical.	business office of i	ts registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted by its board of board, or the corporation has been notified in writing	of directors or by an g of the change.	n officer so	
Rnature	of aporticer or director	Shiv Shahi, Pres	sident	
	the appointment as registered agent and agree to act is comply with the provisions of all statutes relative to I am familiar with and accept the obligation of my pag filed merely to reflect a change in the registered off been notified in writing of this change.			
	hiv hahi afture of Registered Agent	08 12 11		
If signing on bel	•			
Ту	ped 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 * * *

CR2E045 (8/05)