

PO6000136053

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TALLAHASSEE, FLORIDA

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C. LEWIS

OCT 7 2013

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FEATHERLIGHT PRECAST PRODUCTS, INC.
Name of Corporation

DOCUMENT NUMBER: P06000136053

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Karina Pulskamp
Name of Contact Person

Registered Agent Solution, Inc.
Firm/Company

1701 Directors Blvd. Ste 300
Address

Austin TX 78744
City/State and Zip Code

clientservices@rasi.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karina Pulskamp at (888) 705-7274
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

September 24, 2013

VIA US MAIL

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: **Featherlight Precast Products, Inc.**

Dear Sir or Madam:

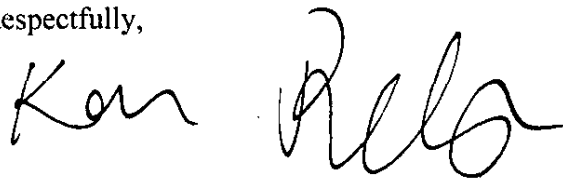
On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,



KARINA PULSKAMP
REGISTERED AGENT SOLUTIONS, INC.

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FEATHERLIGHT PRECAST PRODUCTS, INC.
2. The principal office address: 600 S. ANDREWS AVENUE POMPANO BEACH, FL 33069
3. The mailing address (if different): 10320 LITTLE PATUXENT PARKWAY SUITE 606 COLUMBIA, MD 21044
4. Date of incorporation/qualification: 10/26/2006 Document number: P06000136053
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

BRISTOW, MARTIN
600 S. ANDREWS AVENUE
POMPANO BEACH, FL 33069

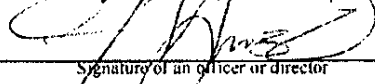
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agent Solutions, Inc.
155 Office Plaza Dr. Suite A
P.O. Box NOT acceptable
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

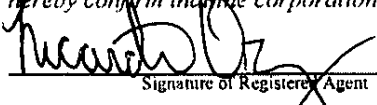
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Martin Bristow - CEO
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

9/24/13
Date

If signing on behalf of an entity:
Ricardo Orozco, Secretary
Typed or Printed Name

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