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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Axxys Construction Group, Inc.

Name of Corporation

DOCUMENT NUMBER.

P07000127780

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:

Nate Sanders

Name of Contact Person

Axxys Construction Group, Inc.

Firm/Company

4101 Nicols Road, Suite 100

Address

Eagan, MN 55122

City/State and Zip Code

nsanders@axxysconstruction.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Lou Street

,,877 \588-808(

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

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

•	as 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this a corporation organized under the laws of the State of Florida
	tered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: A:	xxys Construction Group, Inc.
4.4	01 Nicols Road, Suite 100, Eagan, MN 55122
2. The principal office address: 4	
3. The mailing address (if different):	
4. Date of incorporation/qualificatio	n: 11/29/2007 Document number: P07000127780
5. The name and street address of th Florida Department of State: (If re	e current registered agent and registered office on file with the esigned, enter resigned)
Gary S. Duna	y
5355 Town C	enter Road, Ste 801
Boca Raton,	FL 33486
6. The name and street address of th (if changed):	enter Road, Ste 801 FL 33486 e new registered agent (if changed) and /or registered office
Corporation S	Service Company 9. 35
1201 Hays St	
TA 6-1	P.O. Box NOT acceptable
Tallahassee,	FL 32301
The street address of its registered as changed will be identical.	office and the street address of the business office of its registered agent,
Such change was authorized by resauthorized by the board, orthocorp	olution duly adopted by its board of directors or by an officer so or officer so of the change.
Signature of an officer or differen	Johan Chayon Tres, dent
I hereby accept the appointment as I further agree to comply with the performance of my duties, and I an agent. Or, if this document is being hereby confirm that the corporation Corporation Service Comp	registered agent and agree to act in this capacity. registered agent and agree to act in this capacity. registered agent and agree to act in this capacity. registered complete registered merely to reflect a change in the registered office address, l has been notified in writing of this change. any
By: Signature of Registered Agent	
If signing on behalf of an entity:	
Krista Swenson, Assistant Vic	e President
•	* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)