P09000083865

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
TALL AT POST FURIDA

**SEP 13 2013

T. CARTER

COVER LETTER

a	Twilialat Camtua atium C	Na
SUBJECT:	Twilight Contracting C Name of Corp	poration
DOCUMENT N	UMBER: P09000083865	
The enclosed Stat	ement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all c	orrespondence concerning this matter to	o the following:
	Steven Pick Name of Conta	<u>kett</u>
	Name of Conta	ct Person
	InCorp Servi	ces, Inc.
	Firm/Com	pany
	2360 Corporate Cir	cle · Suite 400
	Addres	s
	Henderson, NV	
	City/State and	Zip Code
	E-mail address: (to be used for futi	are annual report notification)
For further inform	nation concerning this matter, please cal	1:
S <u>teven Pickett</u> Na	on behalf of Incorp Services, Income of Contact Person	at (702) 866-2500 Area Code & Daytime Telephone Number
Enclosed is a \$35	.00 check made payable to the Departm	ent of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

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 nge is submitted for a corporation organized under the laws of the State of <mark>Florida</mark> r to change its registered office or registered agent, or both, in the State of Florida	3	
	he corporation: Twilight Contracting Corporation		
2. The principal	office address: 509 Route 70 West, Cherry Hill, NJ 08002		- <u>-</u>
			
3. The mailing a	ddress (if different):		
4. Date of incorp	ncorporation/qualification: 10/09/2009 Document number: P0900083865		
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)		
	NRAI SERVICES, INC.		TA'S
	1200 South Pine Island Road		ECRE
	Plantation, FL 33324		
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	PH 3: 4:	OF STATI
	InCorp Services, Inc.	ස	DE A
	17888 67th Court North		
	P.O. Box NOT acceptable Loxahatchee, FL 33470		
The street address changed will	ess of its registered office and the street address of the business office of its regist be identical.	tered a	gent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer board, or the corporation has been notified in writing of the change.	so	
	Robert Halgas		
I hereby accept I further agree to performance of agent. Or, if th	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 my duties, and I am familiar with and accept the obligation of my position as registed decument is being filed merely to reflect a change in the registered office addressed that the corporation has been notified in writing of this change.	zistered ess, I	d
A 1	August 21, 2013		
	nature of Registered Agent Date		
_	half of an entity:		
Steven Pick	ett on behalf of Incorp Services, Inc. yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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