P09000083904

| (Re | equestor's Name) | | | |
|-------------------------|--------------------|-------------|--|--|
| (Ad | dress) | | | |
| . (Ad | ldress) | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nar | me) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to | Filing Officer: | | | |
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FILED SECRETARY OF STATE TALL /PINSSEE, FI GRIDA

SEP 13 2013 T. CARTER

COVER LETTER

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Amendment Section Division of Corporations

TO:

| CLID VID CO | Evanlibur Contractina | Companies |
|-------------------------------|---|---|
| SUBJECT: | Excalibur Contracting Name of Cor | poration |
| DOCUMENT NU | MBER: P09000083904 | |
| The enclosed States | ment of Change of Registered Office/ | Agent and fee are submitted for filing. |
| Please return all co | rrespondence concerning this matter t | to the following: |
| _ | Steven Pic | kett |
| | Name of Cont | act Person |
| | InCorp Serv | |
| | Firm/Con | npany |
| | 2360 Corporate Cir | rcle · Suite 400 |
| | Addre | SS |
| | Henderson, NV | 89074-7722 |
| | City/State and | Zip Code |
| _ | E-mail address: (to be used for fut | ture annual report notification) |
| For further informa | tion concerning this matter, please ca | ılı: |
| S <u>teven Pickett</u> Nan | on behalf of Incorp Services, Inc ne of Contact Person | at (<u>702</u>) <u>866-2500</u> Area Code & Daytime Telephone Number |
| Enclosed is a \$35.0 | 0 check made payable to the Departn | nent of State. |
| | Mailing Address: Amendment Section | Street Address: Amendment Section |
| | Division of Corporations | Division of Corporations |
| | P.O. Box 6327 | Clifton Building |

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

| • | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flo | | - | |
|----------------------------------|--|-----------------------------|--------------------|---|
| | inge is submitted for a corporation organized under the laws of the Stai r to change its registered office or registered agent, or both, in the Stat | • | | _ |
| | the corporation: Excalibur Contracting Corporation | v | | |
| 7. The name of | office address: 509 Route 70 West, Cherry Hill, NJ 08002 | | | |
| 2. The principal | office address: | | | |
| 3. The mailing a | address (if different): | | | |
| 4. Date of incorp | poration/qualification: 10/09/2009 Document number: P0 | 90000839 | 04 | |
| | d street address of the current registered agent and registered office on fritment of State: (If resigned, enter resigned) | ile with the | | |
| | NRAI SERVICES, INC. | | | |
| | 1200 South Pine Island Road | | | |
| | Plantation, FL 33324 | | 13 | TAL SE |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or register | ed office | SEP -3 | CHESS CHES CHE |
| | InCorp Services, Inc. | | PH | |
| | 17888 67th Court North | | ယ ယ | STAT |
| | P.O. Box NOT acceptable | | 7 | S) (L) |
| | Loxahatchee, FL 33470 | | | |
| The street address changed will | ess of its registered office and the street address of the business office be identical. | of its regis | tered a | gent, |
| | as authorized by resolution duly adopted by its board of directors or be board, or the corporation has been notified in writing of the change | | so | |
| | Robert Halgas | Robert Halgas | | |
| J | re of an officer or director Printed or typed name | | | |
| I further agree a nerformance of | 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 my duties, and I am familiar with and accept the obligation of my pois document is being filed merely to reflect a change in the registered that the corporation has been notified in writing of this change. | d complete sition as rec | zistered ess, I | d |
| | August 21, | 2013 | | |
| Sig | nature of Registered Agent Date | | | _ |
| If signing on be | chalf of an entity: | | | |
| Steven Pick | tett on behalf of Incorp Services, Inc. | | | |

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 * * *