P16127

(Re	questor's Name)	
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DEPARTMENT OF STATE
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TALLAHASSEE FSTAI

e.A.Chq. C.COULLIETTE

AUG 16 2011

EXAMINER



CORPORATION SERVICE COMPANY.

ACCOUNT NO. : I2000000195

REFERENCE

4813947

AUTHORIZATION 4

COST LIMIT :

\$ 35.00

ORDER DATE: August 9, 2011

ORDER TIME : 9:34 AM

ORDER NO. : 874653-014

CUSTOMER NO: 4813947

CHANGE OF AGENT

NAME: THE REINFORCED EARTH COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

statement of cha	ange is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statutes, thi ized under the laws of the State of Delaware ered agent, or both, in the State of Florida.	<i>s</i>
1. The name of	the corporation: THE REINFORCED	EARTH COMPANY	
2. The principal	office address: 8614 Westwood Cente	er Dr., Suite 1100, Vienna, VA 22182 US	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 09/28/1987	Document number: P16127	
	d street address of the current registered aprument of State:	gent and registered office on file with the	
	CT Corporation System		_
	1200 South Pine Island Rd.		
	Plantation, FL 33324 US		1 AUG 16 EURE TAK LLAHASS
6. The name and (if changed):	d street address of the new registered agen	at (if changed) and /or registered office	NUG 16 AMII: 45 RETARY OF STATE ANASSEE, FLORIDA
	Corporation Service Company		40A 11E 1-5
	1201 Hays Street		
	(P.O. Box NOT acceptable) Tallahassee, FL 32301		
The street addreas changed will	·	address of the business office of its registered	d agent,
=		I by its board of directors or by an officer so tified in writing of the change.	
11400	ure of an officer or director)	Maureen Cathell, Vice President (Printed or typed name and title)	
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent an to comply with the provisions of all statt ad I am familiar with and accept the obli	•••	r. if this
By:	my -	08/09/2011	
(51)	gnature of Registered Agent)	(Date)	
	chalf of an entity:		
Sylvia Quepp	<u> </u>		
ξ.	Typed or Printed Name)		

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