

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-0821
Fax Number : (850) 558-1515

12 JUL -6 PM 3:03
SECRETARY OF
DIVISION OF CORPORATIONS

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Email Address: _____

**REGISTERED AGENT CHANGE
PETERSON CONTRACTORS, INC.**

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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@ 7/6/12

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**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 Iowa _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PETERSON CONTRACTORS, INC.
2. The principal office address: 104 Black Hawk St
Reinbeck, IA 50669
3. The mailing address (if different): PO Box A
Reinbeck, IA 50669-0155
4. Date of incorporation/qualification: 02/29/1988 Document number: P18213
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NRAI Services Inc515 E. Park AvenueTallahassee, FL 32301

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

Corporation Service Company1201 Hays Street(P.O. Box NOT acceptable)Tallahassee, FL 32301

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.

Maureen Cathell
(Signature of an officer or director)

Maureen Cathell, Vice President(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.

Corporation Service CompanyBy: Sylvia Queppet(Signature of Registered Agent)June 26, 2012(Date)

If signing on behalf of an entity:

Sylvia Queppet, Assistant Vice President(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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