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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195

Phone : (850)521-1000 Fax Number : (850)558-1575 OYFEB-3 PMD: 01

DIVISION OF CORPORATIONS

MECEIVEL)
09 FEB -3 AM 8: 0(
ECRETARY OF STATE

REGISTERED AGENT CHANGE

MACTEC ENGINEERING AND CONSULTING, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

RA/ROCHS

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Corporate Filing Menu

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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, this ange is submitted for a corporation organized under the laws of the State of Delawate are to change its registered office or registered agent, or both, in the State of Florida. | |
|---|--|-------------|
| | the corporation: MACTEC ENGINEERING AND CONSULTING, INC. | |
| 2. The principal | office address: tewood Parkway, #300, Alpharetta, GA 30004 | |
| 3. The mailing a | address (if different): | |
| 4. Date of incorp | poration/qualification: 04/18/1991 Document number: P33646 | |
| | d street address of the current registered agent and registered office on file with the tunent of State: | |
| | C T Corporation System | |
| | 1200 South Pine Island Road | |
| | Plantation, FL 33324 | |
| 6. The name and (if changed): | i street address of the new registered agent (if changed) and for registered office | 9 |
| | Corporation Service Company 1201 Hays Street | "ORPORATION |
| | 1201 Hays Street | ATH |
| | (P.O. Box NOT acceptable) | ŠMČ |
| | Tallahassee, FL 32301 | |
| The street address changed will | ess of its registered office and the street address of the business office of its registered agent, be identical. | |
| Such change wa | as authorized by resolution duly adopted by its board of directors or by an officer so see board, or the corporation has been notified in writing of the change. | |
| May | Maureen Cullen, Attorney in Fact (Francet or typed name and title) | |
| l kerdby accept : I further agree to of my duties, and document is bein corporation has | 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 performance of all am familiar with and accept the obligation of my position as registered agent. Or, if this no filed merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change. | |
| By/// | ion Service Company Will Kunnny 20-09 patient of Registration Agents) (Date) | |
| | half of an entity: | |
| Michelle R. | Vannoy, Asst. V.P. | |
| <u>(U</u> | ypod 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
CR2E045 (8/05)