9353



ACCOUNT NO. : 072100000032

REFERENCE : 407268

4358627

AUTHORIZATION :

COST LIMIT :

\$ 35.00

ORDER DATE : October 11, 1999

ORDER TIME: 11:28 AM

ORDER NO. : 407268-040

200003012662

CUSTOMER NO: 4358627

CUSTOMER: Mr. Wendell E. Phillips Southdown, Inc.

1200 Smith St. / Ste. 2400

Houston, TX 77002

CHANGE OF AGENT

NAME:

SUNSHINE AGGREGATES INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson

C. COULLIETTE OCT 1 2 1999

... 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,
the undersigned corporation organized under the laws of the State of DELAWARE
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation is: SUNSHINE AGGREGATES INC.
1. The hand of the corporation is, sometime additional inc.
2. The mailing address of the corporation is: P.O. BOX 1659
INVERNESS, FL 34451-1659
3. Date of incorporation/qualification: 06/23/92 Document number: P39353
4. The name and address of the current registered agent and office:
PATRICIA M. PETRACH
2461 EAST GULF-TO-LAKE HIGHWAY
INVERNESS, FL 34451-1659
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Corporation Service Company
1201 Hays Street
Tallahassee, Florida 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.
Malle Tulla 10/6/99
(Signature of an officer, chairman or vice chairman of the board) (Date)
WENDELL PHILLIPS, II ASSISTANT SECRETARY
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
BV: Saura P. Dust 10-12-99
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
LAURA R. DUNLAP (Typed or Printed Name) ASSISTANT VICE PRESIDENT (Capacity)
* * * FILING FEE: \$35.00 * * *
CR2EO45(7/97)

P.O. Box 6327

TALLĀHASSĒE, FL 32314

DIVISION OF CORPORATIONS