200		ikiess kiepo	וא וו			¢				1
DOCU 1. Entity Nam	MENT # P40086				FILED					
RAWLINS CONSTRUCTION, INC.			, 2	٤		02 MAR 14 PM	3: 03			
Principal Plac		Mailing Address 508 TWILIGHT TRAIL			$\exists \emptyset$	SECRETARY OF TALLAHASSEE.	= STATE FLORIDA			
100 RICHARDSON TX 75080 US		100 RICHARDSON TX 75090 US			1		ı 4:0:4 0:01: 0:0!!	. 21211 9 171	11 2 (2 () (2 ()	
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			RE	INSTATEME	ATHIS SPACE	DE	00	2
City & State		City & State			4.	FEI Number 75-2207693		No	oplied For of Applicable	-
Zip	Country	Zip	Coun	try		Certificate of Status Desired	Fee	. 75 Add Require		
	6. Name and Address of Current	Registered Agent		Nama	7.	Name and Address of New Reg	istered Ager	<u>1t</u>		┨
· · ·	CODDODATION CYCTEM	The second se	*~	Name -	ــِ در م ــــــــــــــــــــــــــــــــــــ			. ·	<u> </u>	
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				Street Addre	ss (P.O.	Box Number is Not Acceptable)	•			-
PLAN	1AHUN FL 33324				<i>;</i> ·					
				City	/		FL	Zip Code	e	1
8. The above	named entity submits this statement fo	r the purpose of changing its	register	ed office or regi	stered ac	gent, or both, in the State of Floric	da.			1
CICNIATLIDE	(-/-			C. Mo Special Assi		ary	3/12/	01		
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registere	d Agent signature req	uired when I	einstating)	DATE	<u>-, </u>		ļ
9. This corpo	oration is eligible to satisfy its Intangible	FILE NOW!	! FEE	IS \$150.00		10. Election Campaign Finan	cina	¢ E 0	<u></u>	1
_	requirement and elects to do so. ria on back)	After MAY 1, 200 Make Check Payab		•		Trust Fund Contribution.			May Be I to Fees	
11.	OFFICERS AND	DIRECTORS	12.		ΑI	DDITIONS/CHANGES TO OFFICE]
title Name	CP DANG INC DICHARD D	☐ Delete	NAM				_	Change	Addition	3
STREET ADDRESS	RAWLINS, RICHARD R. 508 TWILIGHT TRIAL, STE 100		. II	ET ADDRESS		3000051; -04/02/0	8211 20102	13-	20 (* -	}
CITY-ST-ZIP	RICHARDSON TX 75080		CITY	-ST-ZIP		サイリとイリ ****19月3		.1 O: **3门;		ا ا
TITLE	VCV	☐ Delete	TITLE					Change	Addition] 8
NAME	RAWLINS, RODGER L		NAM	1						
STREET ADDRESS CITY-ST-ZIP	508 TWILIGHT TRAIL, STE 100 RICHARDSON TX 75080		II .	ET ADDRESS - ST - ZIP						
TITLE	DST	☐ Delete	TITLE	:		·	П	Change	Addition	1
NAME	RAWLINS, RANDY A.		NAM							
STREET ADDRESS _ _ CITY-ST-ZIP	508 TWILIGHT-TRAIL, STE 100 RICHARDSON-TX-75080	- ·	- 11	ET ADDRESS				·		<u> -</u>
TITLE	AVP	☐ Delete	TITLE					Change	Addition	1
NAME	TRACY, BRAD D		NAM							
STREET ADDRESS CITY-ST-ZIP	508 TWILIGHT TRAIL STE 100		- 14	ET ADDRESS -ST-ZIP						l
TITLE	RICHARDSON TX 75080	☐ Delete	TITLE					Change	☐ Addition	1
NAME	AVP Rocer Rainey		NAM	l l			Ь	Change	☐ Addition	
STREET ADDRESS	Roger Rainey 508 Twilight Trail, Bichardson, Texa	Ste 100	STRE	ET ADORESS						ŀ
CITY-ST-ZIP	Richardson, Texa	s 75080	CITY	-ST-ZIP						1
TITLE		☐ Delete	TITLE	I				Change	☐ Addition	ŀ
NAME STREET ADDRESS			NAM! STRE	ET ADDRESS						1
CITY-ST-ZIP	•		11	-ST-ZIP						
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address, w	true and accurate and that movered to execute this report a with all other like empowered.	ıy signal as requi	ure shall have t red by Chapter	he same 607, Flor	legal effect as if made under oat	h; that I am a ppears in Blo	n officer ock 11 or	or director	

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

972.907.7282 Daytime Phone #