

P9400005103Z

(Requestor's Name)

Florida Keys Aggregate
1010 7th Ave SW
Nashville, FL 33050



200040116392

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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

1. The name of the corporation: Florida Keys Aggregate Inc.
2. The principal office address: 10610 7th Avenue Gulf
Marathon, FL 33050
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/5/94 Document number: P94000051032

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Robert K. Miller
2975 Overseas Highway
Marathon, Florida 33050

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

Leroy Smith
10610 7th Avenue Gulf
(P.O. Box NOT acceptable)
Marathon, Florida 33050

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.

[Signature]
(Signature of an officer or director)

Leroy Smith, 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.

[Signature]
(Signature of Registered Agent)

Aug 27-04
(Date)

If signing on behalf of an entity:

N/A
(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