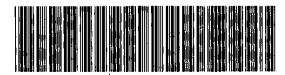
P98000086945

(R	Requestor's Name)				
(Address)					
(Address)					
(C	City/State/Zip/Phone #)				
PICK-UP	WAIT · MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

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2010 JUNI IL PM 2: 03

R.A.

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JUN 17 2010

COVER LETTER

TO: Amendment Division o	nt Section f Corporations	•	
SUBJECT:	BROCK CONSTR	RUCTION INC	•
SUBJECT:	Name of	Corporation	j
DOCUMENT NU	MBER: P98	3000086945	<u>:</u>
The enclosed State	ment of Change of Registered Offi	ce/Agent and fee are sul	omitted for filing:
Please return all co	rrespondence concerning this matt	er to the following:	
	, JAY R. POR	TNOY, C.P.A.	
:	Name of C	ontact Person	•
•	PORTNOY, SHAINBR	OWN & CO. CPA's,	P.A
;	Firm/C	Company	,
!		BLVD, SUITE 101	
; , ;	Ad	dress	*
•	JACKSONVILLI	E, FL 32257-9240	
	City/State	and Zip Code	•
-	JAYPORTNOY@PORTN E-mail address: (to be used for		
ţ.		· -	ı
For further informa	ation concerning this matter, please	call:	
	R. PORTNOY, C.P.A.	at (904)	731-8005 x 218
Nar	me of Contact Person	Area Code & D	aytime Telephone Number
Enclosed is a \$35.0	00 check made payable to the Depa	rtment of State.	• •
;		•	
:	Mailing Address: Amendment Section Street Address: Amendment Section		ess: t Section
	Division of Corporations		Corporations
t.	P.O. Box 6327 Tallahassee, FL 32314		utive Center Circle

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the	provisions of sections 607.0502, 617	7.0502, 607.1508, or 617.1508	8, Florida Statut	es, this
statement of che	ange is submitted for a corporation o	organized under the laws of the	e State of FLO	RIDA .
in orde	er to change its registered office or re	egistered agent, or both, in the	State of Florid	a.
1. The name of	the corporation: BROCK CON	STRUCTION, INC.	!	
2. The principal	l office address: 1611 LOCKEND	ROAD		
	JACKSONVILLE	, FL 32221		
3. The mailing	address (if different):			
	•	•		
4. Date of incor	rporation/qualification: 10/12/1	998 Document number:	. ½ , P980	00086945
	d street address of the current registe artment of State: (If resigned, enter re-		on file with the	•
	BROCK, SUSAN (RESIGNE	ED)		
;	1611 LOCKEND ROAD		:	~
,	JACKSONVILLE, FL 32221		•	PET B
6. The name an (if changed):	d street address of the new registered	agent (if changed) and /or reg	istered office	THIL JUH 14 PH 2: 03
	BERRY, RICHARD		1	PH 2
	402 HANSEN AVE		•	9.00
; {	P.O. Bo	ox NOT acceptable		7
;	ORANGE PARK, FL 32065-	6740	····	
The street addr as changed will	ress of its registered office and the s	treet address of the business	office of its reg	istered agent,
Such change wauthorized by t	vas authorized by resolution duly ad the board, or the corporation has been	opted by its board of director en notified in writing of the c	rs or by an offic hange.	er so
Ouga Signatu	ure of an officer or director		BROCK, CEO	<u>)</u>
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered age, to comply with the provisions of al nd I am familiar with and accept th ing filed merely to reflect a change is been notified in writing of this ch	nt and agree to act in this call I statutes relative to the prope e obligation of my position as in the registered office addre ange.	pacity. er and complete s registered age ess, I hereby co	e performance ent. Or, if this nfirm that the
Reihard	Bury of Registered Sent	6/10/	2010	
If signing on he	ehalf of an entity:	, J.	,	
5.5	onun or un viinty.			
. Т	Typed or Printed Name	· · · · · · · · · · · · · · · · · · ·	•	•
	* * * FILING	G 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)