1/18/00-90156-040-$150.00-$150.00

DOCUMENT # P99000074712

1. Entity Name

TRENCH SHORING SERVICES OF JACKSONVILLE, INC.

FILED
Apr 19, 2000 8:00 am
Secretary of State
01-18-2000 90156 040 ***150.00

Principal Place of Business	Mailing Address
6770 E 56TH AVE COMMERCE CITY CO 80022	6770 E 56TH AVE COMMERCE CITY CO 80022-4037

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2515 N. EDGEWOOD AVE	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: JACKSONVILLE FL.	City & State
Zip: 32254 Country: US	Zip Country

4. FEI Number: 58-2490952 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	Name: PAT SPENCER Street Address (P.O. Box Number is Not Acceptable): 481 THORPE ROAD City: ORLANDO FL Zip Code: 32824

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PAT SPENCER - SECRETARY Pat Spencer 1/10/2000
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒	**FILE NOW!!! FEE IS $150.00** **After MAY 1, 2000 Fee will be $550.00** **Make Check Payable to Department of State**	10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SPENCER, DENNIS I PRESIDENT 6770 E 56TH AVE COMMERCE CITY CO 80022	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PAT SPENCER SECRETARY 481 THORPE ROAD ORLANDO, FL 32824	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT KEITH LAMBERSON 4745 BAKERS FERRY Rd. S.W. ATLANTA, GA 30336	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LARRY A. HAIDER TREASURER 5371 MAGNOLIA ST. COMMERCE CITY, CO 80022	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS I SPENCER Dennis I Spencer 1/10/2000 303-287-2706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #