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| (Requ | uestor's Name) | | | | |
|---|-----------------|--------------|--|--|--|
| (Address) | | | | | |
| (Addı | ress) | | | | |
| (City/ | State/Zip/Phone | e #) | | | |
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NOV 4 2015 I ALBRITTON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: James M. Newsome janis.smith@cscglobal.com

Date: October 29, 2015

Order#: 843237/001

Re: CAMBRIDGE BUILDERS, INC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:James M. Newsome c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

| statement of ch | provisions of sections 607.0502, 617.05 ange is submitted for a corporation orga er to change its registered office or regis | nized under the la | ws of the State of | ·FL | _ |
|---|---|--|--|------------------------|-------------|
| 1. The name of | the corporation: CAMBRIDGE BUILDER | RS, INC | | ··· | |
| | l office address: e Rd, Suite 202, Griffith IN 46319 | <u>.</u> | | | |
| 3. The mailing | address (if different): | | | | |
| 4. Date of incor | poration/qualification: 02/22/2005 | Document | number: P05000 | 0027630 | |
| 5. The name an | d street address of the current registered artment of State: (If resigned, enter resign | agent and register | | | |
| | INCORP SERVICES, INC. | | | | , i |
| | 17888 67TH COURT NORTH | | | ARY C | m |
| | LOXAHATCHEE | FL | 33470 | PH I: I | O |
| 6. The name an (if changed): | d street address of the new registered ag | ent (if changed) an | d /or registered o | | |
| | Corporation Service Company | | | | |
| | 1201 Hays Street | | | _ | |
| | P.O. Box NO Tallahassee | OT acceptable FL | 32301 | | |
| The street addr | ress of its registered office and the stree I be identical. | t address of the bu | isiness office of i | - its registered ag | ent, |
| Such change wauthorized by t | vas authorized by resolution duly adopte the board, or the corporation has been n | ed by its board of o | directors or by an of the change. | officer so | |
| Silat | rule of a Hicer of director | Dona Priebe | ed or typed name and t | itle | |
| I further agree performance o agent. Or, if the hereby confirm | of the appointment as registered agent a to comply with the provisions of all sto f my duties, and I am familiar with and his document is being filed merely to re n that the corporation has been notified on Service Company | itutes relative to the accept the obligate flect a change in t | ne proper and co. tion of my position he registered offi | on as registered | ı |
| By: X | gnature of Registered Agent | 10/28/2015 | Date | | _ |
| | ehalf of an entity: | | · - | | |
| | y, Asst. Vice President | | | | |
| | Typed or Printed Name | | | | |

* * * FILING FEE: \$35.00 * * *