## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (85C) 617-6380

from:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

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## REGISTERED AGENT CHANGE THE GATEWAY ENGINEERS, INC.

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C. CARROTHERS

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGIS			
BOTH FOR CORPORATIONS	SECRET	A 12 Y (14	CANATO

	BOTH FOR CORP		SECRETARY OF STATE
Pursuant to the	provisions of sections 607.0502, 617.0502,	607.1508, or 617.1	508, Florida Statutes, this URIDA
	nge is submitted for a corporation organiz		
in orde	r to change its registered office or register	ed agent, or both, ti	n the State of Florida.
1. The name of t	he corporation: THE GATEWAY ENGINEE	ers, inc.	
	office address:		
400 HOLIDA	Y DRIVE, SUITE 300 PITTSBURGH, PA 15	5220	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 02/13/2013	Document nun	nber: P13000000681
5. The name and	street address of the current registered ago timent of State: (If resigned, enter resigned	ent and registered o	
	CORPORATION SERVICE COMPANY		
	1201 HAYS STREET TALLAHASSEE, FL	32301-2525	
6. The name and (if changed):	street address of the new registered agent C T Corporation System	(if changed) and /o	r registered office
	c/o C T Corporation System, 1200 South Pin	e Island Road	
	P.O. Box NOTa		
	Plantation, Florida 33324		
The street address changed will	ess of its registered office and the street as be identical.	ddress of the busin	ess office of its registered agent,
Such change we authorized by the	is authorized by resolution duly adopted to board, or the corporation has been notice.	y its board of dire fied in writing of th	ctors or by an officer so te change.
		Jose Castellanos,	
I hereby accept I further agree performance of agent. Or, if th	the appointment as registered agent and to comply with the provisions of all statut my dulies, and I am familiar with and got socument is being filed merely to reflect the corporation has been notified in	agree to act in this as relative to the p cept the obligation of a change in the r	typed name and title capacity. roper and complete of my position as registered egistered office address, I nge.
By: CT Cor	poration System Alfred Younan	4/3/2015	
<b>y</b> -	half of an entity:	····	Detc
ir sikinisk mi be	mair or the outery.		
T	yped or Printed Name		
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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEB, FL 32314
CR2E045 (03/12)