L11000002402

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SECRETARY OF SIGNED ON SIGNED OF CORPORATION

N. Culligan MAR - 8 2011

COVER LETTER

TO: Registration Section

INHS18 (5/08)

* *	' Division of Corporations					
SUBJ	JECT: Es	Estimation Creation LLC				
	Name of Limited Liability Company					
Dear	Sir or Madam:					
The e	nclosed Registered Agent/Registered	Office	Change	and fe	e(s) are submitted for filing.	
Please	e return all correspondence concernin	g this m	atter to	the fol	lowing:	
	Donald E Gralin			·		
	Name of Person					
	Estimation Creation LLC Firm/Company					
	15625 Orange Blvd.					
	Address					
	Loxahatchee, Fl 33470					
	City/State and Zip Code			_		
E	backdraft125@yahoo.cor	n notification	on)			
	rther information concerning this ma			:		
	Donald E Gralin	at (_	561	_)	798-4690	
	Name of Person		1	Area Cod	le & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclosed is a check for the following	ng am	unt:			
	\$25 Filing Fee		\$5	5 Filin	g Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered tigent, or both, in the State of Florida.

1. Name of the limited liability company:	Estimation Creation LLC			
2. (a) Principal office address of limited liability co	ompany: 8877 Kettle Drum Terrace			
(Note: MUST BE STREET ADDRESS)	Boynton Beach, Fl 33473			
(b) Mailing address of limited liability company	: 8877 Kettle Drum Terrace			
(Note: MAY BE POST OFFICE BOX)	Boynton Beach, Fl 33473			
01/05/2011	L11000002902			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office sho	wn on the records of the Florida Dept. of State:			
Registered Agent:	Grimaldi, Jarrett <u>⇒ ≦∽</u>			
Registered Office Address:	8877 Kettle Drum Terrace			
(b) Enter name of <u>NEW Registered Agent</u> and/				
NEW Registered Agent:	Donald E Gralin			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	15625 Orange Blvd.			
	Loxahatchee ,FL 33470			
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will b liability company, it is hereby confirmed that the change of the members of the limited liability company or a or the operating agreement of the limited liability company or the operating agreement of the limited liability company or a signature of amember or authorized representative of a member are signature of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operation of the limited liability company	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization ompany.			
comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability consistence of Registered Agent	t and agree to act in this capacity. I further agree to the proper and complete performance of my duties, my position as registered agent as provided for in I to merely reflect a change in the registered office company has been notified in writing of this change.			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00