

PO6000136426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

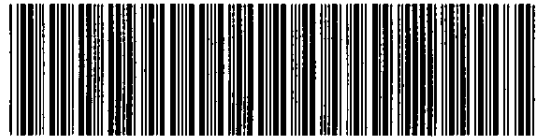
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400166263314

PA Change

02/08/10--01047--002 **35.00

FILED
2010 FEB -8 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Ad
2/9/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARNIELLA CONTRACTORS, CORP.
Name of Corporation

DOCUMENT NUMBER: PO6000136426

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

BERNARDO ARNIELLA
Name of Contact Person

ARNIELLA CONTRACTORS, CORP.
Firm/Company

5671 SW 129 PL
Address

MAMI, FL, 33183
City/State and Zip Code

.arniellacontractors@yahoo.com.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BERNARDO ARNIELLA at (239) 331-1703
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ANNIELLA CONTRACTORS, CORP.

2. The principal office address: 5671 SW 129 PL MIAMI, FL, 33183

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/26/2006 Document number: P06000136426

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Bernardo Arniella
4425 19TH PL SW NAPLES, FL
34116

FILED
2010 FEB - 8 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Bernardo Arniella
5671 SW 129 PL MIAMI FL 33183

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

BERNARDO ARNIELLA
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

02/03/2010
Date

If signing on behalf of an entity:

BERNARDO ARNIELLA
Typed or Printed Name

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