L0100003156

(Re	questor's Name)	<u> </u>
(Address)		
		
(Ad	dress)	
(Cit	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(54	omoco Emaly Ma	
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
101-3186	<u> </u>	RA Chay.

Office Use Only



000068978960

03/30/06--01053--029 **25.00

SECRETALY OF STATE

DE HAR 30 AM II: I



COVER LETTER

LC	
Limited Liability Company)	
Office Change and fee(s) are submitted for filing.	
this matter to the following:	
•	
	
er, please call:	
at (954) 972-0026	
(Area Code & Daytime Telephone Number)	
MAILING ADDRESS: Registration Section	
Division of Corporations	
P.O. Box 6327	
Tallahassee, Florida 32314	
ng amount:	
☐ \$55 Filing Fee & Certified Copy	

INHS18 (8/05)

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 gagent, or both, in the State of Florida. 1. The name of the limited liability company is: DOWNEY GLASS INDUSTRIES, LLC 2. The mailing address of the limited liability company is: 1100 NORTHWEST 15TH AVENUE POMPANO BEACH, FLORIDA 33069 03/01/2001 L01000003156 Date of filing/registration in Florida Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: FILINGS, INC. Name 3732 NORTHWEST 16TH STREET Address RDALE, FLORIDA City, State and Zip FORT LAUDERDALE 6. The name and address of the new registered agent and/or office: DANIEL DOWNEY Name 1100 NORTHWEST 15TH AVENUE Florida street address (P.O. Box NOT acceptable) POMPANO BEACH FL 33069 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization of the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Thereby 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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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

INI IS18 (8/05)