W300006471

Architectural Cabinets 4: Milwork LLC 3965 Deer Crossing Ct. # 201 Naples, FL 3\$11\$	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
W3-6471	

100037975101

09/02/04--01012--023 **75.00

MJH .

FILED
04 SEP -2 PH 1:09

Office Use Only

FF \$ 25

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 agent, or both, in the State of Florida.

1. The name of the limited liability company is:	Architectural Cabinets & Millwork LLC
2. The mailing address of the limited liability com	npany is: 3965 Deer Crossing Court #201
	Naples, Florida, 34114
February 17th, 2003	L0300006471
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the register Florida Department of State:	red office address as shown on the records of the
<u>-</u>	aude, Nick
	Name ossing Court #201
	Iddress Plorida, 34114 Interest and Zip
City, S	tate and Zip
6. The name and address of the new registered age	ent and/or office:
Julie	Caron
3965 Deer Cro	ame ossing Court #201
Florida street address ((P.O. Box NOT acceptable)
Naples,	FL , 34114
City, Sta	te and Zip
and the business office of the registered agent will	le, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote of otherwise provided in the articles of organization or apany.
Nick Patenaude	
(Printed or typed name of signee)	
Chapter 608, F.S. Or, if this document is being fill address, hereby confirm that the limited liability	nt and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.
(Signature of Registered Agent)	
Division of Corporations, P.O.	. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)