L03000049259

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name).						
(Document Number)						
Certified Copies: <u>১ জন্ত</u> Certificates of Status <u>ু ৬ নাটেট</u> এ						
Special Instructions to Filing Officer:						





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SECRETARY OF STATE
FALL AHASSEE. FLORID!

J. BRYAN

NOV - 3 2009

EXAMINER

COVER LETTER

TO:	Registration Sect Division of Corpo						
SUBJ	ECT:	Midwest Co			Developm lity Company		
		Name of	Limited	Liabii	iny Company	/	
Dear	Sir or Madam:						
The e	nclosed Registered	Agent/Registered	Office C	hange	e and fee(s) ar	re submitted	for filing.
Please	e return all correspo	ndence concerning	g this ma	tter to	the followin	g:	
	Jo	e A. Livesay				·	1A S
	Na	ne of Person					09 NOV -2 PH 1: 07 SECRETARY OF STATE TALLAHASSEE. FLORID
		uction Developm	ent_LLC	<u> </u>			ASSE -2
	Fin	n/Company					EFF.S.
	1016 Clemo	ons Street, Suite	305				
-		Address			_		D
	Jupiter	r, Florida 33477					
		ate and Zip Code			_		
E	joe@nation -mail address: (to be used	nalroofsystems.c for future annual report	om notification)	_		
For fu	rther information c	oncerning this mat	ter, pleas	se call	l :		
	Rhoda Pl	nipps	at (561	_)	747-409	03
	Name of Pers	on			Area Code & Da	ytime Telephon	e Number
	STREET/COURI	ER ADDRESS:		MA	AILING ADD	RESS:	
	Registration Sectio	n		Reg	gistration Secti	ion	
	Division of Corpor	ations			ision of Corpo	orations	
	Clifton Building). Box 6327		
	2661 Executive Ce Tallahassee, Florid			Tal	lahassee, Flo r i	da 32314	
	Enclosed is a che	ck for the followi	ng amou	ınt:			
	\$25 Filing Fee		[√ \$5	55 Filing Fee	& Certified	Сору

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 liability company submits the following statement in organit, or both, in the State of Florida.	.508, Florida Statutes, the undersigned limited der to change its registered office or registered Developmen f			
Name of the limited liability company:Midwes	t Construction & Construction, LLC			
2. (a) Principal office address of limited liability compa	any: 1016 Clemons Street			
(Note: MUST BE STREET ADDRESS)	Suite 305 Jupiter, Florida 33477			
(b) Mailing address of limited liability company:	1016 Clemons Street			
(Note: MAY BE POST OFFICE BOX)	Suite 305 Jupiter, Florida 33477			
12/02/2003	L03000049259			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:			
Registered Agent:	Joe A. Livesay			
Registered Office Address:	1080 E. Indiantown Roads Suite 205 Jupiter, Florida 33477			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address.			
NEW Registered Agent:				
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1016 Clemons Street Suite 305 Jupiter ,FL33477			
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization			
Z Joe Livesay Printed or typed name of signee	_			