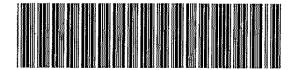
## \*\* WWW 141

	questor's Name	
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(City/State/Zip/Phone #)		
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M. HODGES

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## 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:	Orlando Construction Group, LLC
	mpany is: 7061 Grand National Drive, Suite 124,
Orlando, Florida 32819	**************************************
01/15/2004	L0400004141
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the regist Florida Department of State:  Paul J. Svejda	tered office address as shown on the records of the
7061 Grand Nationa	Name al Drive, Suite 124
Orlando, Florida 32	Address 819 State and Zip
6. The name and address of the new registered ag	
Alan C. Tilley	
7061 Grand National	Name al Drive, Suite 124
Florida street address	(P.O. Box NOT acceptable)
Orlando	FL 32819
City, St	tate and Zip
and the business office of the registered agent will liability company, it is hereby confirmed that the the members of the limited liability company or a the operating agreement of the limited liability confirmed that the confirmed liability confirmed the limited liability confirmed that the confirmed liability confirmed liability confirmed that the confirmed liability liability confirmed liability liability confirmed liability liab	ade, the Florida street address of the registered office II be identical. Or, in the case of a Florida limited charge(s) was/were authorized by an affirmative vote of its otherwise provided in the articles of organization or impany.  Confy Crange  State of Horoan
(Signature of a member or authorized representative of a member	r) Venue V. STOKES
Alan C. Tilley (Printed or typed name of signee)	MY COMMISSION # DD 420682  EXPIRES: April 19, 2009
•	gent and agree to act in this eapacity. I further agree to to the proper and complete performance of my duties, so f my position as registered agent as provided for in illed to merely reflect a change in the registered office by company has been notified in writing of this change.
·	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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