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M. THOMAS

AUG 1 2 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Gutter Experts, LLC (Name of Limited Liability Company)	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	3
Please return all correspondence concerning this matter to the following:	
Evelyn Ramirez (Name of Person)	OF STATE
The Gutter Experts, LC	
P.D. BOX 782163	
ORlando, F. 32878 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	
\$25 Filing Fee & Certified Conv	

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 company submits the following statement in order to changin the State of Florida.	Florida Statutes, the undersigned limited liability ge its registered office or registered agent, or both,
1. Name of the limited liability company: The (Sutter Experts, CC
2. (a) Principal office address of limited liability company · (<i>Note: MUST BE STREET ADDRESS</i>)	2118 Caesar CT, Orlando, Fl 32833
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.D. Box 782163 Orlando, Fl 33878
3. Date of filing/registration in Florida	L040000 13686 1. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	All Florida Fine 5 7
Registered Office Address:	13 Deltona Blud. B. Deltona Fl 32725 To
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address: The Cuffer Experi
NEW Registered Agent:	<u>Evelyn Kamirez</u> "LU
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Orlando FL 32833
If the limited liability company is not organized under the lattat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized b liability company or as otherwise provided in the articles of limited liability company.	address of the registered office and the business use of a Florida limited liability company, it is an affirmative vote of the members of the limited
(Signature of a member or authorized representative of apnember)	•
(Printed or typed name of signee)	-
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signature of Registered Agent)	

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