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B. KOHR

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EXAMINER

COVER LETTER

	Division of Corporations				
SUBJ	TECT:	TALCO CON	NSTRUCTIO	ON, LLC	
		Name of Limited	d Liability Com	npany	
Dear :	Sir or Madam:				
The e	nclosed Registered Agent/l	Registered Office	Change and fee	e(s) are submitte	d for filing.
Please	e return all correspondence	concerning this m	atter to the foll	owing:	v i
*	CASSIDY, JOS Name of Pers		· .		10 AUG 27 PH 43 46
	TALCO CONSTRU Firm/Compar			ta t	9.1 E H
~ .	530 SUSAN B BRITT Address WINTER GARDE City/State and Zig	N, FL 34787	<u>)</u>		
Е	jcassidy@talcocon -mail address; (to be used for future	annual report notification	on)		
For fu	orther information concerni	ng this matter, ple	ase call:		
	JOSEPH R CASSIDY	JR at (407)	654-44	26
	Name of Person		Area Code	e & Daytime Telepho	one Number
	STREET/COURIER ADI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, Florida 32301		Registration Division of P.O. Box 63	Corporations	
	Enclosed is a check for	the following am	ount:		
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy		

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.

agein, or com, at the state of 1 for that	
1. Name of the limited liability company:	ALCO CONSTRUCTION, LLC
2. (a) Principal office address of limited liability compa	any: 530 SUSAN B BRITT COURT
(Note: MUST BE STREET ADDRESS)	SUITE 280 WINTER GARDEN, FL 34787
(b) Mailing address of limited liability company:	530 SUSAN B BRITT COURT
(Note: MAY BE POST OFFICE BOX)	SUITE 280 WINTER GARDEN, FL 34787
2/26/2004	L04000015373
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	ALL FLORIDA FIRM INC 3
Registered Office Address:	813 DELTONA BLVD
	STE A NATIONAL EL 22725
	DELTONA, FL 32725
	ا ليد"
(b) Enter name of NEW Registered Agent and/or N	EW Registered Office address:
NEW Registered Agent:	CASSIDY, JOSEPH R JR
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1037 WOODSON HAMMOCK CIRCLE
-	WINTER GARDEN ,FL 34787
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 ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as otly or the operating agreement of the limited liability company.	e Florida street address of the registered office entical. Or, in the case of a Florida limited
Signature of a member or authorized representative of a member	
JOSEPH R CASSIDY JR Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited hability completes of Registered Agent	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)