## L040000/6845

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
, ,		
(Document Number)		
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SECRETARY OF STATE
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T. CLINE

JAN 13 2009

**EXAMINER** 

## **COVER LETTER**

Division of Corporations		
Division of Corporations		
SUBJECT: Mr. Pressure Cleaner LLC		•
	mited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	matter to the following:	
Kevin M Velez	. ~-2	
(Name of Person)	2009 JAH 12 AM II: 01 SECRETARY OF STATE TALLAHASSEE, FLORIDA	w 25 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Mr. Pressure Cleaner LLC	TA TO	1
(Firm/Company)		<b>F</b> "
	The B	Ę
5830 NE 2nd Terrace		
(Address)		<b>ن</b>
, ,	₽*	
Fort Lauderdale, FL. 33334	•	
(City/State and Zip Code)	<del></del>	
For further information concerning this matter, ple	lesse call·	
r of faction information concerning this matter, pre	rease can.	
Kevin M Velez at (	( 561 ) 271 9954	
(Name of Person)	(Area Code & Daytime Telephone Number)	
,		
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amo	nount:	
☑ \$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.

1. Name of the limited liability company: Mr Pressu	re Cleaner LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 5830 NE 2nd Terrace Fort Lauderdale, FL 33334
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5830 NE 2nd Terrace Fort Lauderdale, FL 33334
04/30/08	L04000016845
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:	Kevin M Velez
Registered Office Address:	371 NW 23rd St
	Boca Raton, FL 33431
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent:	SSEE, F
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5830 NE 2nd Terrace
parties and the second	Fort Lauderdale  ,F = 333334
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member or authorized representative of a member)	eet address of the registered office and the business case of a Florida limited liability company, it is
(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 pam 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 trability company has been notified (Signaphre of Registered Agent)	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I in a registered agent as provided for in Chapter 608, is change in the registered office address, I hereby ed in writing of this change.

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