L04000032636

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	(Requesti	or's Name)	
	(Address)		
	(Address)	<u> </u>	
	(City/State	e/Zip/Phone #	<i>‡</i>)
PICK-UF	· [WAIT	MAIL
<u>**.</u>	(Business	s Entity Name	<u> </u>
	(Docume	nt Number)	
Certified Copies		Certificates of	of Status
Special Instructions	to Filing	Officer:	
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SEGRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: EASTERN STRUCTUR	ES, LLC (Name of corporat	(on)				
	(Maine of corporat	,				
DOCUMENT NUMBER: L040000226	36					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
	and manufic to mic					
DANIEL L. SCOLAR	!DI					
	(Name of contact pe	rson)	-			
•						
EASTERN STRUCT	URES, LLC					
	(Firm/Company	}				
2280 TREASURE ISLE DR #87						
(Address)						
PALM BEACH GARDENS, FL 33410						
(City/state and zip code)						
For further information concerning this m	atter, please call:					
DANIEL L. SCOLARDI	at (561 ₁ 775-1581				
(Name of contact person)		Area code & daytime teleph	one number)			
Enclosed is a \$35.00 check made payable	to the Department of	f State.	ZINS JI SECRE			
Mailing Address		Street Address:	JUN 23 CRETARY C			
Amendment Secti Division of Corpo	on rations	Amendment Section Division of Corporations	ARY C			
P.O. Box 6327 Tallahassee, FL 3		409 E. Gaines Street Tallahassee, FL 32399	e. FLO			

, STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	ctions 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this	
	I for a corporation organized under the laws of the State of FLORIDA	
•	egistered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation:	EASTERN STRUCTURES, LLC	
2. The principal office address:_	2280 TREASURE ISLE DR. #87	
	PALM BEACH GARDENS, FL 33410	
3. The mailing address (if different	ent):	
4. Date of incorporation/qualific	ation: 03/25/2004 Document number: L04000022636	
	of the current registered agent and registered office on file with the	
DANIEL L. SC	OLARDI	
1101 SEAFAR	ER CIRLCE #406	
JUPITER FL	33477	
6. The name and street address of (if changed):	of the new registered agent (if changed) and /or registered office	
DANIEL L. SC	OLARDI	
2280 TREASU	RE ISLE DR #87	
	(P.O. Box NOT acceptable)	
PALM BEACH	GARDENS FL 33410	
The street address of its registe as changed will be identical.	red office and the street address of the business office of its registered agent,	
Such change was authorized by authorized by the hoard, or the	resolution duly adopted by its board of directors or by an officerso corporation has been notified in writing of the change.	T
Sibrature of an officer or di	DANIEL L. SCOLARDI, MGRM	
I hereby accept the appointmer I further agree to comply with of my duties, and I am familiar document is being filed merely corporation has been potified i	nt as registered agent and agree to act in this capacity. the provisions of all statutes relative to the proper and complete performance with and accept the obligation of my position as registered agent. Or, if this to reflect a change in the registered office address, I hereby confirm that he n writing of this change.	C
late	Agent) (6/21/05 (Date)	
(Signature of Registered If signing on behalf of an entity		
(Typed or Printed Nam	ue)	

* * * FILING FEE: \$35.00 * * *