L04000053934

Scott D Dutay (Requestor's Name)
(Requestors Name) 754 N. 7941 Aug (Address)
Pensacula. F1. 32506 (Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 21, 2005

SCOTT D. DUNBAR 704 N. 79TH AVENUE PENSACOLA, FL 32506

SUBJECT: ALPHA CABINET, LLC Ref. Number: L04000053934

We have received your document for ALPHA CABINET, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You submitted the wrong form. I am enclosing the proper forms to change the REGISTERED AGENT / OFFICE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 305A00042454

Neysa Culligan Document Specialist

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 limite 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: \(\int\lambda\) \(\text{lpha Cabinet, LLC}\)
2. The mailing address of the limited liability company is: 704 N. 7946 Ave.
Pensacola, FL 30506
7131/04 L04000153934
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Name Name
Persacola, FL 30534 City, State and Zip
6. The name and address of the new registered agent and/or office:
TOH D Junkar TOH N 79 UN Ave Florida street address (P.O. Box NOT acceptable) Pensacola FL 3050U City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608 F.S. Oc. if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent)

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

INHS18(10/99)

FILING FEE: \$25.00