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(Document Number)
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08/02/04-01029--025 **25.00



Mr. James Monroe Williams

301 Deluna Place, Panama City Beach, Fl 32413

Telephone 850-960-2483

July 30, 2004

Registration Section Division of Corporations PO Box 6327 Tallahassee, FI 32314

Re: James Williams Plastering, LLC Doc. # L04000055775

Moaree Ill

TO WHOM IT MAY CONCERN:

Please be advised that the address has changed on the above Company FROM - 327 Derondo Street, Panama City Beach, Fl 32413 TO - 301 Deluna Place, Panama City Beach, Fl 32413.

We have enclosed the forms and fees to correct this on your records along with this letter to correct any additional records that would need to be changed. If you need anything else to correct this address change, please contact Connie Tharpe at 850-785-4412.

Thank you for your help in this matter.

Sincerely,

Mr. James Monroe Williams

Registered Agent and Managing Member

TRANSMITTAL LETTER

	Registration Section Division of Corporations					
SUBJEC	CT: JAMES WILLIAMS PLASTERING, LLC					
20202	(Name of Limited Liability Company)					
The encl	losed Articles of Organization and fee(s) are submitted for filing.					
	Please return all correspondence concerning this matter to the following:					
	JAMES MONROE WILLIAMS					
	(Name of Person)					
	JAMES WILLIAMS PLASTERING, LLC	TALL	40			
	(Firm/Company)		A			
		A 2	04 AUG -2	125 (FARAGE		
	301 DELUNA PLACE	HASSE	$\dot{\sim}$			
	(Address)	Üις	P	7 11 11		
		7	~~E	parts.		
	PANAMA CITY BEACH, FL 32413	읈	PH 12: 30	THE		
	(City/State and Zip Code)	Lokiov	0			
For furth	ner information concerning this matter, please call:					
CONNI	E THARPE at (850) 785-4412					
	(Name of Person) (Area Code & Daytime Telephone Number)					

STREET ADDRESS:

1

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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. The name of the limited	liability company is:	JAMES WILLIAMS PLAST	FERING, LLC		
		mpany is: 301 DELUNA PL			
PANAMA CITY BEACH					
7/26/2004		L04000055775	j		
3. Date of filing/registration	on in Florida	4. Document number			
5. The name of the register Florida Department of S	tate:	ered office address as shown o	on the records of the		
-		IROE WILLIAMS Name	· ·-		
		NDO STREET	7		
	PANAMA CITY	Address BEACH, FL 32413 State and Zip	Ot AUG		
6 The name and address of		•	ASSE		
6. The name and address of					
-		ROE WILLIAMS			
	301 DELUN	lame NA PLACE	PMI2:30		
-	Florida street address	(P.O. Box NOT acceptable)	9.0		
	PANAMA CITY BCH	l, _{EI} 32413			
-	· · · · · · · · · · · · · · · · · · ·	ate and Zip	=		
If the limited liability comp confirmed that after the character and the business office of the liability company, it is here the members of the limited the operating agreement of the limited liability company in the liability company i	by confirmed that the cliability company or a the limited liability co	nder the laws of the State of Fide, the Florida street address of le identical. Or, in the case of change(s) was/were authorized softerwise provided in the art impany.	lorida, it is hereby of the registered office of a Florida limited I by an affirmative vote of icles of organization or		
JAMES MONROE WILL	IAMS				
(Printed or typed name of signee)					
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm the confirmation of the confi	tment as registered ag of all statutes relative accept the obligations in a document is being si that the limited liability	ent and agree to act in this cap to the proper and complete pe of my position as registered a led to merely reflect a change reompany has been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.		
(Signature of Registered Agent)	unere we	1/2	1 see s		
Division	of Corporations, P.C). Box 6327, Tallahassee, FL	32314		

FILING FEE: \$25.00

INH\$18(10/99)