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(Re	equestor's Name)	
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Registration Section Division of Corporations	-	
SUBJECT: R & T Aluminum Services, LLC (Name of Limite	ed Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for	filing.
Please return all correspondence concerning this r	matter to the following:	
Bruce R. Abernethy, Jr.  (Name of Person)		
Bruce R. Abernethy, Jr., P.A. (Firm/Company)	·	
500 Virginia Avenue, Suite 202		7. 0
(Address)	·	8ECH 8ECH
Fort Pierce, FL 34982		SSW WHY 61 a
(City/State and Zip Code)	<del></del>	SECHELLAY OF STATE
For further information concerning this matter, ple	ease call:	16 E
Bruce R. Abernethy, Jr. at (		<del></del>
(Name of Person)	(Area Code & Daytime Telep	hone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following ame	ount:	
<b>✓</b> \$25 Filing Fee	\$55 Filing Fee & Certified Copy	у

## 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: R	R & T Aluminum Services, LLC			
2. The mailing address of the limited liability comp	pany is : 6781 N. Old Dixie Highway,			
Fort Pierce, FL 34951	***			
01/07/2005	L05000002222			
3. Date of filing/registration in Florida	4. Document number			<del></del>
5. The name of the registered agent and the register Florida Department of State:	red office address as shown on the r	ecords of	f the	
Bruce R. Abernethy, J				
	lame			
900 Virginia Avenue, Su		₹ro	90	
	ldress	E	SEP	
Fort Pierce, FL 34982 City, State and Zip		至	<del>} 0</del>	
6. The name and address of the new registered agen	•		19 /	
Down D. Alternation to		72 24	AM II: 16	Ü
Bruce R. Abernethy, Jr.		- 25	• •	
Nar 500 Virginia Avenue, Sui	<del></del>	웃규	क	
<del>_</del>	P.O. Box NOT acceptable)	, ,		
Fort Pierce, F	т <u>.</u> 34982			
City, State	e and Zip	_		
If the limited liability company is not organized unconfirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the chof the members of the limited liability company or or the operating agreement of the limited liability company.	e, the Florida street address of the rope identical. Or, in the case of a Florange(s) was/were authorized by an as otherwise provided in the article	egistered orida limi affirmati	office ted ive vot	te
(Signature of a member or authorized representative of a member)				
Bruce R. Abernethy, Jr.				
(Printed or typed name of signee)	· ·			-
I hereby accept the appointment as registered agen comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability co	at and agree to act in this capacity. The proper and complete performa If my position as registered agent as If the merely reflect a change in the rompany has been notified in writing	I further nce of my provided egistered of this c	agree dutie l for it l office hänge	to is, in
(Signature of Registered Agent)	-		٠,	
Division of Corporations, P.O. 1	Box 6327, Tallahassee, FL 32314			

**FILING FEE: \$25.00** 

INHS18 (8/05)