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COVER LETTER

	Registration Section Division of Corporations	
SUBJE	CI;	CTION MANAGEMENT, L.L.C. mited Liability Company)
Dear Si	or Madam:	
The enc	losed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning th	nis matter to the following:
	TERESITA A. CRAIG	
	(Name of Person)	
WEST	COAST CONSTRUCTION MANAG	EMENT, L.L.C.
2208	(Firm/Company) - 58TH Avenue East	PILE OF CORPORATION O
	(Address)	Fig. 7
Brad	lenton, FL 34203	LORUS CORRESPONDENCE OF THE SECOND CORRESPOND CORRESP
	(City/State and Zip Code)	
For furt	her information concerning this matter	·, please call:
	Allie Hueter	at (941) 371-0440
	(Name of Person)	(Area Code & Daytime Telephone 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	; amount:
	\$25 Filing Fee	X \$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.

L.L.C.

1. The name of the limit	ed liability company i	s: West	Coast Cons	structi	on Management,		
2. The mailing address of							
Y			Bradento		34203		
January 20, 2005 L 05000				006111			
3. Date of filing/registration in Florida			4. Document number				
5. The name of the regist Florida Department of		assman			ie records of the		
	Orlando, F	Address L 3280			DING OCT		
6. The name and address	of the new registered	agent and/	•		OF COL		
	Teresita A.						
	2208 - 58th	Name Avenue	East		SPT ST		
	Florida street addre	ess (P.O. Bo	x NOT accepta	able)	ESC.		
	Bradenton	FL	34203				
	City,	State and 2	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.

(Signature of a member of authorized representative of a member)

Teresita A. Craig, Managing Member

(Printed or typed name of signce)

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. Or, 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.

Teusita A. Craig
(Signature of Registered Agent) Teresita A. Craig

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