## 6050000022442

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Special filed decisions to 1 ming Officer.		
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A. LUNT		
FEB <b>20</b> 2009		

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## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CAR IBBEAU COUS (Name of Limite	STRUCTION SERVICE LLC d Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.	
Please return all correspondence concerning this matt		
DAVID A. QUILLED (Name of Person)	9 PH 3: 46	
CARIBBEAN CONSTRUCTION (Firm/Company)	DUSERVICE LLC	
13174 EASTPOINTE WAY		
PALM BEACH GARDENS, F. (City/State and Zip Code)	33418	
For further information concerning this matter, please	call:	
DAVID A. QUILLED at (50) (Name of Person) (A	rea 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	\$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.

1. Name of the limited liability company: <u>CARI</u>	BBEAN CONSTRUCTION SERVICE LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	NY: 13174 EASTPOINTE WAY PALM BEACH GARDEUS, FL 33418
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SIME AS ABOVES
3. Date of filing/registration in Florida	<u>L05000022447</u> 4. Document number ω
5. (a) Registered Agent and Registered Office shown o	The state of the s
Registered Agent:	CORPORATE CREATIONS NETWORK INC.
Registered Office Address:	11380 PROSPERITY FARMS RD. # 221-E PALM BEACH GARDENS FL 33410
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	LARIBBEAN CONSTRUCTION GERVEGLLO
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13174 EASTPOINTE WAY PALM BCH GARDEUS ,FL 33418
If the limited liability company is not organized under the that after the change or changes are made, the Florida str office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.	eet address of the registered office and the business
(Signature of a member or authorized representative of a member)	<u> </u>
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the partial familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notification.	agree to act in this capacity. I further agree to proper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ed in writing of this change.

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

(Signature of Registered Agent)