

LD5000029807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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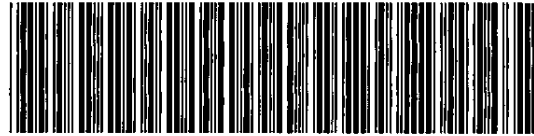
(Business Entity Name)

(Document Number)

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07 SEP 24, PM 2:18
SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION

LAW OFFICES OF
LYNN B. AUST, P.L.
ATTORNEY AND COUNSELOR AT LAW

1220 E. Livingston Street
Orlando, Florida 32803
(407) 447-5399 E-mail: doveattorney@austlaw.biz (407) 447-5861 Fax

September 21, 2007

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

Sir/Madam:

Please find the following for filing:

- Articles of Amendment to Articles of Organization
- A firm check in the amount of \$25.00
- Statement of Change of Registered Office or Registered Agent of Both for Limited Liability Company.
- A firm check in the amount of \$25.00

If you have any questions, please let me know.

Sincerely,



Caylee E. Woods
Legal Assistant to
Lynn B. Aust

Cc: Client File

LBA/cw

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: AJB Technical Services, LLC
2. The mailing address of the limited liability company is : 3914 Scarborough Court
Clermont, FL 34711

March 24, 2005

L05000029807

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:

Matthew H. Roby

Name

1270 Orange Avenue, Suite D

Address

Winter Park, FL 32789

City, State and Zip

6. The name and address of the new registered agent and/or office:

Lynn B. Aust

Name

1220 E. Livingston Street

Florida street address (P.O. Box NOT acceptable)

Orlando

FL 32803

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.

Aurelia A. Bremer
(Signature of a member or authorized representative of a member)

Aurelia A. Bremer
(Printed or typed name of signer)

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.

[Signature]
(Signature of Registered Agent)

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

FILING FEE: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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