L05000041756

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SECRETARY OF STATE AS DIVISION OF CORPORATIONS

COVER LETTER

Division of Corporations	
SUBJECT: Stouffer Construction (Name of Limite	d 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 n	natter to the following:
Larry Edward Stour	$\preceq \leq \omega$
Stouffer Construction (Firm/Company)	יוי 🗅
3406 India Palm Dr. (Address)	PH 2: 10
Edgewater, FL 32141 (City/State and Zip Code)	
For further information concerning this matter, ple	ase call:
Larry E Stouffer Jr. at (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 amo	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (8/05)

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.

agent, or both, in the state of Ftoriaa.		
1. The name of the limited liability company is: _S	stouffer Constr	ruction LL
2. The mailing address of the limited liability compa	any is: <u>3406 India</u>	Palm Dr.
Edgewater, FL 32141		
	L050000	41756
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered Florida Department of State:	d office address as shown on the	e records of the
All Florida Na	Firm Inc	
465 S. Volusi		o P.
Orange City, Stat	E and Zip	SECRETION OF AUG
6. The name and address of the new registered agent	and/or office:	20 FCC
Larry E. St Nam	touffer Jr.	PH 2: 10
\$ 3406 India	O. Box NOT acceptable)	ATIONS 2: 10
Edgewater, FI City, State	32141 and Zip	_
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be	er the laws of the State of Florid	a, it is hereby

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)

(Printed or typed name of signee)

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, thereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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