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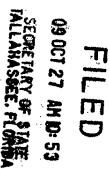
(Requestor's Name)			
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PICK-UP WAIT MAIL			
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D. BRUCE

OCT 28 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUB.		s Konkrete Krushing, LLC f Limited Liability Company
	. tume c	i Biliniou Bilininy
Dear	Sir or Madam:	
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concernir	ng this matter to the following:
	lnez B. Walker	
	Name of Person	
	Firm/Company	
	0005 Marray Daine	
	2895 Mercy Drive	
	Address	
	Orlando, Florida 32808	
	City/State and Zip Code	
E	-mail address: (to be used for future annual repor	t notification)
For fu	orther information concerning this ma	itter, please call:
	lnez B. Walker	at (407) 765-9223
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallahassee, Florida 32301	
	Enclosed is a check for the follow	ing 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:B.	J.'s Konkrete Krushing, LLC			
2. (a) Principal office address of limited liability compan	y: 2895 Mercy Drive			
(Note: MUST BE STREET ADDRESS)	Orlando, Florida 32808			
(b) Mailing address of limited liability company:	2895 Mercy Drive			
(Note: MAY BE POST OFFICE BOX)	Orlando, Florida 32808			
11/05/2003	L05000056850			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
Registered Agent:	DeLoach-Bryant, Carla			
Registered Office Address:	1206 East Ridgewood Steet S			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address 5				
NEW Registered Agent:	Inez B. Walker			
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2895 Mercy Drive			
	Orlando ,FL32808			
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 number or authorized representative of a member Inez B. Walker 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 tadress, I hereby confirm that the familied liability company has been notified in writing of this change.				

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

Signature of Registered Agent