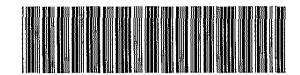
105000057571

(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:	\neg				





400064371524

01/26/06--01025--014 **\$5.00

2006 JAN 26 PH 12: 41

1057511

COVER LETTER

Division of Corporations							
SUBJECT: Daley Construction, LLC							
(Name of Limited Liability Company)							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office	fice Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this	his matter to the following:						
Thomas L Daley Jr.							
(Name of Person)							
Daley Construction, LLC							
(Firm/Company)							
4510 Beach Park Drive	2006 TALL						
(Address)	ARET JAN						
Tomas Elerida 22600	26 SSEE						
Tampa, Florida 33609 (City/State and Zip Code)	SECRETARY OF STATE ALLAHASSEE. FLORIT						
For further information concerning this matter,	; please call:						
Thomas L Daley Jr.	at (813) 924-5977						
(Name of Person)	(Area Code & Daytime Telephone Number)						
CORRECTION ADDRESS	MAM BIG ADDDDGG						
STREET/COURIER ADDRESS: Registration Section	DRESS: MAILING ADDRESS: Registration Section						
Division of Corporations	Division of Corporations						
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314						
Tallahassee, Florida 32301	rananassee, Fiorida 32314						
Enclosed is a check for the following a	amount:						
\$25 Filing Fee	\$55 Filing Fee & Certified Copy						

INHS18 (8/05)

TO: Registration Section

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 con	npany is: Daley Const	ruction, LLC	
2. The mailing add	ress of the limited lia	ability company is: 3	3189 W San Miguel	St
Tampa, FL 33629				
June 6, 2005			L 05000057571	
	gistration in Florida		4. Document nun	nber
5. The name of the Florida Department	registered agent and ent of State:	the registered office	address as shown	on the records of the
	Melissa Cla	rk Daley		
	2910 W Con	Name Migual St	-	,
	3819 W San	Address		
	Tampa, FL 3		-	
		City, State and Zi	p	
6. The name and ad	ldress of the new reg	istered agent and/or o	office:	7s 20
	Thomas L D	alev Jr.		2006 JAN 26 SECRETAR'S
		Name		
	4510 Beach I			ASS
	Florida stree	et address (P.O. Box	NOT acceptable)	
	Tampa	FL 336	09	PM 12: 4 OF STATE
		City, State and Zip		—— 0RIE 2: 4-1
confirmed that after and the business of liability company, i of the members of or the operating agr	r the change or chang fice of the registered it is hereby confirme the limited liability of	d that the change(s) to company or as otherw d liability company.	rida street address al. Or, in the case vas/were authorize	•
Thomas L Daley Jr.				
(Printed or typed name of	- .		- ;	
I hereby accept the comply with the pro- and I am familiar w Chapter 608, F.S. address, I hereby of	e appointment as reg ovisions of all statute with and accept the o Or, if this document on irm that the limite	distered agent and ages relative to the property bligations of my positions being filed to mere and liability company to	ree to act in this ca er and complete p tion as registered e ly reflect a change has been notified it	spacity. I further agree to erformance of my duties, agent as provided for in the registered office my writing of this change.
(Signature of Registered	Agent)		 -	•

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