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## **COVER LETTER**

TO: Registration Section Division of Corporate	ions					
SUBJECT: AMERICA	AN SOLUTION (Name of Limited			<u>C</u>		
Dear Sir or Madam:						
The enclosed Registered Ag	ent/Registered Office C	Change a	nd fee(s) are submi	tted for filin	g.	
Please return all correspond	ence concerning this ma	atter to th	ne following:			
Aixa D. Lopez-Avi	<b>es</b> of Person)					
L.L. Professional	Services, Inc.		. ·			
7661 Currency Dri	ve					
(Add	ress)					•
Orlando,FL 32809					7 <u>8</u> 05	
(City/State	and Zip Code)			•	₹ <b>1</b>	
For further information cond	erning this matter, plea	ase call:			05 NOV 17 PM 12: 42 SECRETARY OF STATE INLIAHASSEE FLORIDA	
Aixa D. Lopez-Avile	es at (4	107	850-7280		影光	
(Name of Per		(A	rea Code & Daytin	ne Telephon		,
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns Circle	Regis Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 nassee, Florida 32314	4		
Enclosed is a check	for the following amo	unt:				
\$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 Florida.
1. The name of the limited liability company is: American Solution Investment LLC
2. The mailing address of the limited liability company is: 3964 Beacon Ridge Way
Clermont, Florida 34711
08/05/2005 L05000077256
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:  Randie Hernandez  Name  2690 Valiant Drive  Address  Clermont, Florida 34711  City, State and Zip  6. The name and address of the new registered agent and/or office:
Antonio Sierra  Name  3964 Beacon Ridge Way  Florida street address (P.O. Box NOT acceptable)  Clermont  City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is necessary 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 or authorized representative of member)
Randie Hernandez (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, I hereby confirm that the limited 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)