## L05000081077

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies <u></u> Certificates of Status <u>্থকে ৮</u> :	
Special Instructions to Filing Officer:	





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C. LEWIS

OCT 3 0 2009

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Step Step Dywall UC Name of Limited 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 matter to the following:		
Greg Steele  Name of Person  Greg Steele Trywall LLC  Firm/Company		
P. O. Box 6124  Address		
Persacula, +1 30503 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Greg Steele at (850) 290-8832		
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 amount:		
\$25 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:	Heele Tyway UC	
2. (a) Principal office address of limited liability company	: Greg Steele Drywall W	
(Note: MUST BE STREET ADDRESS)	220 Barcelona Street Pensacola, Florida 32502	
(b) Mailing address of limited liability company:	Gog Stole Trywall LC	
(Note: MAY BE POST OFFICE BOX)	P.O. BUY 6124 Pensocula, Florida 32503	
8 Is lus	LOS00081077	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	Greg State	
Registered Office Address:	5892 Audulan Stract Parsocola, FI 37504	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Greg Steele 230 Borcelona Street	
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 affilmative 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 a member		
Printed or typed name of signee	LORIDA CORIDA	
I hereby accept the appointment as registered agent and ageomply with the provisions of all statutes relative to the proand I am familiar with and accept the obligations of my post Chipter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that phylimite plability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.	
Signature of Registered Agent	72009 TAL	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 PR 58 FILING FEE: \$25.00		