105000100240

	•	
(Re	questor's Name	e)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Pho	ne #)
PICK-UP	WAIT	MAIL
	siness Entity Na	ame)
(24	omoso Emily M	
	cument Numbe	-)
(50	cument numbe	')
Certified Copies	_ Certificate	es of Status
Special Instructions to I	Filing Officer:	
Sent Corp.	kam 1	not UC
150m, 00 P	1	
L05-10124		Phalosa Za
Wille		fachange
	Office Use 0	dr 111
	1/4	1////
	{	111 ''



000075280370

06/05/06--01043--007 **35.00

06 JUL 11 AM11: 22

COVER LETTER

Registration Section

Division of Corporations		
SUBJECT: Tytann Electric, LLC		
	Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Chris Thibideau		
(Name of Person)		
Tytann Electric, LLC		
(Firm/Company)		
467 Forrest Avenue, Suite 116		
(Address)		
O 51 00000		
Cocoa, FL 32926 (City/State and Zip Code)		
(etty/state and stip code)	•	
For further information concerning this matte	er, please call:	
Chris Thibideau	at (321) 288-1991	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the followin	ng amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	



June 9, 2006

CHRIS THIBIDEAU 467 FORREST AVENUE, #116 COCOA, FL 32922

SUBJECT: TYTANN ELECTRIC, LLC

Ref. Number: L05000106240

We have received your document for TYTANN ELECTRIC, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Letter Number: 406A00039741

Leslie Sellers Document Specialist

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

,	
Pursuant to the provisions of soliability company submits the for agent, or both, in the State of Flo	ections 608.416 or 608.508, Florida Statutes, the undersigned limited llowing statement in order to change its registered office or registered orida.
1. The name of the limited liabil	ity company is: Tytann Electric, LLC
2. The mailing address of the lin	nited liability company is : 467 Forrest Avenue, Suite 116, Cocoa, Fl 32922
10-29-05	L05000106240
3. Date of filing/registration in F	Torida 4. Document number
5. The name of the registered age Florida Department of State:	ent and the registered office address as shown on the records of the
•	Thibideau
-20.1. 0.0.0	Name
420 B	arnes Blvd., 4416
	Address
Rockie	edge, FL 32955 City, State and Zip
6. The name and address of the n	ew registered agent and/or office:
Chris '	Thibideau
	Name
467 Fc	orrest Avenue, Suite 116, Cocoa, Fl 32922
Florie	da street address (P.O. Box NOT acceptable)
Cocoa	, FL 32922 FL
	City, State and Zip
confirmed that after the change of and the business office of the reg liability company, it is hereby co	s not organized under the laws of the State of Florida, it is hereby or changes are made, the Florida street address of the registered office istered agent will be identical. Or, in the case of a Florida limited infirmed that the change(s) was/were authorized by an affirmative vote ability company or as otherwise provided in the articles of organization is limited liability company.
Chan	
(Signature of a member or authorized repre	sentative of a member)
CHRZS EARL THZA (Printed or typed name of signee)	IDEA
I hereby accept the appointment comply with the provisions of all and I am familiar with and accept Chapter 608, F.S. Or, if this docaddress, I hereby confirm that the	as registered agent and agree to act in this capacity. I further agree to statutes relative to the proper and complete performance of my duties, of the obligations of my position as registered agent as provided for in ument is being filed to merely reflect a change in the registered office e limited liability company has been notified in writing of this change of the change of the change of this change of the change of this change of this change of this change of the change
(Signature of Registered Agent)	

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

INHS18 (8/05)