

1050014105

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: B & R SERVICES, L.L.C. (Name of I	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:			
BURNEY J. CARTER, ESQUIRE				
(Name of Person)				
BURNEY J. CARTER, P.A.				
(Firm/Company)				
POST OFFICE BOX 780266	_			
(Address)				
SEBASTIAN, FLORIDA 32978-0266				
(City/State and Zip Code)	<u> </u>			
For further information concerning this matter	er, please call:			
BURNEY J. CARTER	_at (_772) 589-3156			
(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	g amount:			
✓ \$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.

1. The name of the limits	ed liability compa	ny is: B&RSERV	ICES, L.L.C.	
2. The mailing address o	f the limited liabil	lity company is:		
13150 - 103RD STREE	T, FELLSMERE, F	LORIDA 32948		
11/29/2005			L05000114105	
3. Date of filing/registration in Florida			4. Document number	
5. The name of the registresisted Florida Department of		e registered office	address as shown or	the records of the
•	RICHARD BAI			
Name 13150 - 103RD STREET				
	FELLSMERE, F	Address LORIDA 32948 City, State and Z	ip.	
6. The name and address		• -	•	
	RICH ROBB			
	244 DICCAVNE	Name		
341 BISCAYNE TERRACE Florida street address (P.O. Box NOT acceptable		NOT accentable)		
	Florida street at	duiess (1.O. Dox	(NOT acceptable)	
	SEBASTIAN,	FL 3295		
	C	City, State and Zip	1	
If the limited liability conconfirmed that after the cand the business office of liability company, it is he of the members of the lir or the operating agreement (Signature of a member or author)	hange or changes the registered aggreby confirmed the nited liability com of the limited li	are made, the Flo ent will be identic nat the change(s) v npany or as otherw ability company.	rida street address o al. Or, in the case o vas/were authorized	f the registered office f a Florida limited by an affirmative vote
RICHARD BAKER				
(Printed or typed name of signee				
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirt	intment as registe is of all statutes re al accept the oblig this document is b that the limited l	red agent and agreelative to the prop gations of my posi being filed to mere iability company i	ree to act in this cap ver and complete per tion as registered as ly reflect a change i has been notified in	acity. I further agree to formance of my duties, ent as provided for in n the registered office writing of this change.
(Signature of Registered Agent)	some.			

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

INHS18 (8/05)