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PICK-UP] WAIT	MAIL	
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Certified Copies	Certificates of	Status	
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

	Registration Section Division of Corporations			
SUBJECT: Signature Construction LLC				
	Name of Limi	ited Liability Company		
Dear S	ir or Madam:			
The en	closed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for	or filing.	
Please	return all correspondence concerning this	s matter to the following:		
	Tom Smith			
	Name of Person			
	Signature Construction LLC Firm/Company			
	4256 Cardinal Blvd Address			
	Wilbur by the Sea, FL 32127 City/State and Zip Code		2010 HAR -8 P	TEM
	TSmith60@cfl.rr.com		FLS	
	nail address: (to be used for future annual report notifice ther information concerning this matter, p	,	PM 12: 50 OF STATE EE. FLORIDA	
	Tom Smith at		· · · · · · · · · · · · · · · · · · ·	
	Name of Person	Area Code & Daytime Telephone N	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	\$55 Filing Fee & Certified C	ору	

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:	Signature Construction LLC
2. (a) Principal office address of limited liability compan	y: 4256 Cardinal Blvd.
(Note: MUST BE STREET ADDRESS)	Wilbur by the Sea, FL 32127
(b) Mailing address of limited liability company:	Signature Construction LLC
(Note: MAY BE POST OFFICE BOX)	4256 Cardinal Blvd. Wilbur by the Sea, FL 32127
02/10/2006	L06000014871
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Tom Smith
Registered Office Address:	2765C REBECCA LN Orange City, FL 32763
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tom Smith 4256 Cardinal Blvd Wilbur by the Sea FO.FL-32127
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the instate of fice
Tom Smith	_
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my papter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company.	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.
Signature of Registered Agent	

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