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(Re	questor's Name)		
(Ad	dress)		
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(Cit	y/State/Zip/Phone	e #)	
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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		,		
			Name of Limited Liability Company		
		Commercial Real Estate, LLC			
The en	closed Registered Agent/R	egistered Office Cl	nange and fee(s) are submitted fo	r filing.	
Please	return all correspondence of	concerning this mat	ter to the following:		
Name of Person Jack Lupo					
,	rim/company Commercial Real Estate, LIC			SECRETA	
	Nero Beach, FL 32963			ETARY OF	
	City/State and Zip Code			Carlo.	
L-1111111 municipo. (10 or useu 101 1411111 municipo 11 municipo 11) jacklupo @ comcast. net					
For fur	rther information concerning	ng this matter, pleas	e call:		
Name of Person Jack Lupo at (_772 _) 532-1671 Area Code & Daytime Telephone Number					
	STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl 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 Co	ру	

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: Commercial Real Esteck, LLC

2. (a) Principal office address of limited liability company: 625 Beachland Blvd., Ste. 1 Nevo Beach, FL 32963 (Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

4. Document number LOG000026269 3. Date of filing/registration in Florida 3_{10} | 2006

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Scott Meyers

Registered Office Address: 2295 NW Corporate Blod, #135 Boca Raton, FL 33431

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**

NEW Registered Agent: Jack Lupo

NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)

625 Beachland Blief Vero Beach 32963

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 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 a member

Tack Lupo 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.

Signature of Registered Agent

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