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2007 JUN 22 AM II: 45 SECRETARY OF STATE TALL AHASSEE, FLORIDA

COVER LETTER

-	tration Section ion of Corporations	
SUBJECT:		and Pressure Washer,LLC. ed Liability Company)
Dear Sir or M	fadam:	
The enclosed	Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return	all correspondence concerning this r	matter to the following:
	Enrique Alvarez (Name of Person)	
Tradition	Painting, Cleaning and Pre	ssure Washer,LLC.
	352 Cocoa Court	
	(Address)	
Ki	ssimmee,FL 34758-3034	
	(City/State and Zip Code)	
For further in	formation concerning this matter, pl	ease call:
	Enrique Alvarez at (407) 873-5423
	(Name of Person)	(Area Code & Daytime Telephone Number)
Regist Divisio Cliftor 2661 E	ET/COURIER ADDRESS: ration Section on of Corporations n Building Executive Center Circle assee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclo	sed is a check for the following am	ount:
□\$2	5 Filing Fee	

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 limited liability compan	y is: Tradition F	ainting,Cleaning and	Pressure Wast	her,LLC.
2. The mailing address of the limited liability company is:		352 Cocoa Court		
Kissimmee,Florida 34758-3034.	٠٠.س.			<u>,</u>
06/23/2006		L06000063948		
3. Date of filing/registration in Florida		4. Document number		
5. The name of the registered agent and the Florida Department of State:	registered office	address as shown on	the records of	the
•	ion Service (Company		
	Name			
12	01 Hays stree	et		
- u i	Address	04.110	7. 2	
Tallahassee,Fl 32301 US City, State and Zip				
	• •	•	AA L	
6. The name and address of the new registered agent and/or office:			2007 JUN 22 SECRETARY ALLAHASSE	Contraction of the Contraction o
Enrique Alvarez			m-	
	Name		AM II: 45 OF STATE OF LORID,	
352	2 Cocoa Cour	<u>t</u>	STAI	
Florida street ad	dress (P.O. Box	NOT acceptable)	15 10A	
Kissimmee	FL 347	58-3034		
Ci	ity, State and Zip	•		
If the limited liability company is not organic confirmed that after the change or changes a and the business office of the registered age liability company, it is hereby confirmed that of the members of the limited liability comport the operating agreement of the limited liability comports the operating agreement of the limited liability comports.	are made, the Flo nt will be identic at the shange(s)	orida street address of cal. Or, in the case of	the registered a Florida limit	office ted
(Signature of a member or authorized representative of a r	nember)			
Enrique Alvarez (Printed or typed name of signee)				
I hereby accept the appointment as register comply with the provisions of all statutes related and I am familiar with and accept the oblige Chapter 608, F.S. Or, if this document is be address, I hereby confirm that the limited lie (Signature of Begistered Agent)	ed agent and ag lative to the prop ations of my posi ing filed to mere ability company	ree to act in this capa per and complete perf ition as registered ago ely reflect a change in has been notified in w	city. I further ormance of my ent as provided the registered writing of this c	agree to duties, l for in l office hange.