L06000068694

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



300142878893

02/05/09--01022--025 **25.00

ZOUG HAR 16 AM ID: 20
SECRETARY DE STATE

C. LEWIS

3-17-2009

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Sheer Engineering Enterpr	
(Name of L	imited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Alex Torkaman, PE	
(Name of Person)	
Factors is a check for the following	
Sheer Engineering Enterprises, LLC	
(Firm/Company)	
Handle 7	1971-1974 1974: Frank John 2004:
4641 SW Dateland St	100 - 000
(Address)	
, , ,	
Port St Lucie, FL 34953	
(City/State and Zip Code)	
(any, and any, and any,	
For further information concerning this matter, p	nlease call
To rainer information concerning this matter, p	Sease can.
Alex Torkaman, PE at	(561) 768-1332
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	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 following:	300 ១ព ី)
2 \$25 Filing Fee A Section 19	☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2009

ALEX TORKAMAN, PE SHEER ENGINEERING ENTERPRISES, LLC 4641 SW DATELAND ST. PORT ST. LUCIE, FL 34953

SUBJECT: SHEER ENGINEERING ENTERPRISES, LLC

Ref. Number: L06000068694

We have received your document for SHEER ENGINEERING ENTERPRISES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 709A00004375

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. Na	me of the limited liability company: Sheer Engineering	ng Enterprises, LLC	
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	7: 4641 SW Dateland St Port St Lucie, FL 34953	## ##
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME	22
7/40/3 3. Da	2006tte of filing/registration in Florida	I-0600068694 4. Document number	G
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
	Registered Agent:	Alex Torkaman, PE	
	Registered Office Address:	6296 Dimond St Jupiter, FL 33458	9
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>		
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		Alex Torkaman, PE	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Port St Lucie ■,FL 34953	
that a office hereb liabili limite	limited liability company is not organized under the fter the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cay confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of deliability company.	t address of the registered office and the business	
	EX Taykaman ed or typed name of signee)		
I her comp am la F.S. confi	weby accept the appointment as registered agent and a ly with the provisions of all statutes relative to the provinition with and accept the obligations of my position Or, if this document is being filed to merely reflect a remaining timited liability company has been notified.	ngree to act in this capacity. I further agree to oper and complete performance of my duties, and as registered agent as provided for in Chapter 60 change in the registered office address hereby in writing of this change.] 18.
Nigh	My Chapter of Agent)		- #
	and the second of Division of Gerocard, and the Burn of the Control of the second of the Control	The state of the s	

动物性 人名德勒