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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporation	· IS
SUBJECT:	AMERICAN SITE SOLUTIONS LLC
	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent.	Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence	e concerning this matter to the following:
Angela M	Steele
Name of Pe	
American Site S	Solutions LLC
- Firm/Compa	any
the second of	
8169 Emerald	I Forest Ct
Address	•
Sanford FL	32771
City/State and Z	
angela@americans	itesolutions.com
angela@americans E-mail address: (to be used for futur	e annual report notification)
For further information concern	ing this matter, please call:
Angela M Steele	
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER AD	DRESS: MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Cir Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for	the following amount:
 ✓ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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:	American Site Solutions LLC
2. (a) Principal office address of limited liability con	mpany: 8169 Emerald Forest Ct
(Note: MUST BE STREET ADDRESS)	Sanford FL 32771
(b) Mailing address of limited liability company:	8169 Emerald Forest Ct
(Note: MAY BE POST OFFICE BOX)	Sanford FL 32771
	-
8/1/2006	L060000762217
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	on on the records of the Florida Dept. of State:
Registered Agent:	Angela M Steele
Registered Office Address:	1811 Brackenhurst Pl
	Lake Mary FL 32746
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	r <u>NEW Registered Office address</u> : as above: Angela M Steele
NEW Registered Office Address:	8169 Emerald Forest Ct
(MUST BE FLORIDA STREET ADDRESS)	
	,FL 32771
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company of a member o	otherwise provided in the articles of organization npany. ARX OF STALLED
Signature of Registered Agent	

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