

100157268121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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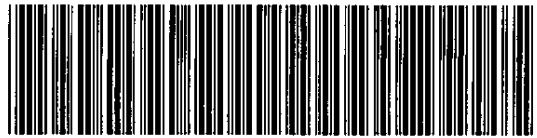
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AUG 12 2009

EXAMINER



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06/25/09--01026--003 **35.00

08/06/09--01007--009 **20.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

707

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A S W Safety Surfacing, 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 concerning this matter to the following:

Moris Maldonado.
Name of Person

A S W Safety Surfacing, LLC.
Firm/Company

1705 Cowart Rd.
Address

Plant City, FL 33567.
City/State and Zip Code

PlaySafe Surfacing@tampabay.rr.com.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Moris Maldonado. at (813) 650-0104
Name of Person Area Code & Daytime Telephone 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 Copy
Difference



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 30, 2009

MORIS MALDONADO
1705 COWART RD
PLANT CITY, FL 33567

SUBJECT: A & W SAFETY SURFACING, LLC
Ref. Number: L06000077903

We have received your document for A & W SAFETY SURFACING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6851.

Gina McLeod
Regulatory Specialist II

Letter Number: 409A00022481

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: A & W Safety Surfacing, LLC.

2. (a) Principal office address of limited liability company: 1705 Cowart Rd.
 Plant City, FL 33567.
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 1705 Cowart Rd.
 Plant City, FL 33567.
(Note: MAY BE POST OFFICE BOX)

3. Date of filing/registration in Florida: 08/08/2006.

4. Document number: L06000071903.

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Agent: Eva M. Nela.
Registered Office Address: 1705 Cowart Rd.
Plant City, FL 33567.

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
NEW Registered Agent: Moris Maldonado.
NEW Registered Office Address: 1705 Cowart Rd.
(MUST BE FLORIDA STREET ADDRESS) Plant City, FL 33567.

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.

Moris Maldonado
Signature of a member or authorized representative of a member

Moris Maldonado
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.

Moris Maldonado
Signature of Registered Agent

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
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