

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90095 016 ***138.75

DOCUMENT # L07000008794

1. Entity Name

MAXX BUILDING SERVICES LLC

Principal Place of Business

5404 CREEK VIEW LANE

PACE FL 32571

Mailing Address

5404 CREEK VIEW LANE

PACE FL 32571

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

74-3201667

Applied For

Not Applicable

5. Certificate of Status Desired

1st MOORE

CR2E083 (10/07)

5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROGERS, RICHARD L

5404 CREEK VIEW LANE

PACE FL 32571

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when resigning)

DATE

FILE NOW!!! FEE IS \$138.75

After May 1, 2008, Fee Will Be \$538.75

Make Check Payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE

MGRM

NAME

ROGERS, RICHARD L

STREET ADDRESS

5404 CREEK VIEW LANE

CITY- ST- ZIP

PACE FL 32571

Delete

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

Change

Addition

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CITY- ST- ZIP

Change

Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

1/25/08

850 995-4208

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Display a Priori #