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SECREDARY OF STATE TALLAHASSEE FLORIDA

OCT OT 2015

J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: BARNHAROT CONSTRUCTION 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:						
CHRIS BARNHARDT Name of Person						
BARNHARNT CONSTRUCTION LLC Firm/Company						
Address PAEASANT ZUN						
WESKY CAMPEL F. 335444 City/State and Zip Code						
BDC BARNHARDTED SMAIL COM E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
CHRIS BARNHARDT at (813) 380 - 7815 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 \$ Certified Copy INHS18 (2/14)						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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 t	he limited liability company:	BARNHARD	- Construc	CTION LLC	
2. (a) 2622	Principal office address of limited lia (Note: MUST BE STREET A.	bility company:	Maili	Eng address of limited lia	
3. 5. (a) To	B/08/2007 Date of filing/registration in LOVEGROVE	Florida 4.		0026013 cument number	
Register	red Agent and Registered Office show 3 Z W: KENWED Y red Office Address (MUST BE FI	BLID TAMPA	A 33609	•	
· ·	ZISTOPHER BARN ame of <u>NEW Registered Agent</u> and/		address:	SECRETARY OF STATE TALLAHASSEE TLOKIDA	2015 OCT -5 PH 4: 01
	Registered Office Address: 221 PHEASANT I	ZUN			
If the limited I the change or agent will be i was/were auth the articles of Signature of a I hereby acceprovisions of the obligation to merely refle	liability company is not organic changes are made, the Florida dentical. Or, in the case of a liorized by an affirmative vote organization or the operating a member of authorized representative of the appointment as register all statutes relative to the property of my position as registered act a change in the registered of this change.	zed under the laws of street address of the reflorida limited liability of the members of the agreement of the limite of a member	the State of Florida egistered office and company, it is her limited liability co ed liability compan CHZISTOTH Prinact in this capacity	d the business office reby confirmed that mpany or as otherway. ER BARNA nited or typed name of six and a further agree to	e of the registered the change(s) rise provided in gnee