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(Red	questor's Name)	
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T. CLINE
JUL 15 2008
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Superstructures of Florida, LI (Name of Lim	_C
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Rich Geiger	
(Name of Person)	74 (0 mg
	STATE OF STA
Superstructures of Florida, LLC (Firm/Company)	
	Mig 2
927 Ocaso Lane, #104	17 17 17 17 17 17 17 17 17 17 17 17 17 1
(Address)	Se Jan UT
	*6
Rockledge, FL 32955 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, ple	ase call:
Rich Geiger at (321) 514-9384
(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 amo	ount:
\$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. 1	Var	ne of the limited liability company: Superstructu	ires of Florida, LLC	0
(Note: MUST BE STREET ADD) (b) Mailing address of limited liability	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: <u>927 Ocaso Lane, #104</u>	Ť	
	(1000 1100 1100 1100 1100 1100 1100 110	Rockledge, Ft. 32955	•	
	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	927 Ocaso Lane. #104	Đ	
(Note: MAT BETOST OFFICE BOX)		(Mile Mile Bull Out Of Tion Bon)	Rockledge, FL 32955	0
6/7/	200	07	L07000060435	
3. I	Dat	e of filing/registration in Florida	4. Document number	
5.	(a)	Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
		Registered Agent:	Janet Chianese	
		Registered Office Address:	691 Cuxhaven Street	
			Palm Bay FL 32907	7. E-12
((b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>		
		NEW Registered Agent:	Rich Geiger 22	in the state of th
NEW Registered Office Address:	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	927 Ocaso Lane, #104	•	
MOST DE LEGRIDA STREET ADDRESS			Rockledge,FL_32955	
that offi here liab lim	afi ce eby ilit ited	imited liability company is not organized under the later the change or changes are made, the Florida street of the registered agent will be identical. Or, in the car confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company. The of a member or authorized representative of a member)	t address of the registered office and the busin ase of a Florida limited liability company, it is y an affirmative vote of the members of the li	ess mited
(Pri	nted	eiger or typed name of signee) by accept the appointment as registered agent and a	- gree to act in this canacity. I further agree to	
con am F.S.	iply far firi	by accept the appointment as registered agent and a y with the provisions of all statutes relative to the pro niliar with and accept the obligations of my position or, if this document is being filed to merely reflect a c m that the limited liability company has been notified	Sper and complete performance of my duties, as registered agent as provided for in Chapte change in the registered office address, I here in writing of this change.	and I r 608, by

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

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