L07000065812

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
JUN 27 2008
EXAMINED

Office Use Only



000131647690

06/25/08--01011--008 **25.00

1000 JUN 25 P 12: 57 SECRETARY OF STATE ULLAHASSEE, FLORIDA

COVER LETTER

FO: Registration Section Division of Corporations	
SUBJECT: CONGRU, L.L.C.	
, ,	(Name of Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Re	gistered Office Change and fee(s) are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
Richard T. Johnston	
(Name of Person	
	LAHASSE LAHASSE
CONGRU, L.L.C.	Z Z
· (Firm/Company)	SE SE
13542 U.S. Highway 441	TA D
13342 U.S. HIGHWAY 441	1.0 P. 12:
(Address)	STATE LORIUS
	3
Canal Point, Florida 33	438
(City/State and Zip C	Code)
For further information concerning	this matter, please call:
Richard T. Johnston	at (814) 883-7324
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDR	ESS: MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the	e following amount:
\$25 Filing Fee	S55 Filing Fee & Certified Conv

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:CONG	GRU, L.L.C.
2. (a) Dutaning office address of limited lightlifts of	ammanus 135/2 II C. Highway ///
2. (a) Principal office address of limited liability converge (Note: MUST BE STREET ADDRESS)	Canal Point, Florida
(Note: MUSI BE SIREET ADDRESS)	33438
(b) Mailing address of limited liability company	: <u>13542 U.S. Highway 441</u>
(Note: MAY BE POST OFFICE BOX)	Canal Point, Florida
· · · · · · · · · · · · · · · · · · ·	33438
June 22, 2007	L07000065812
	4. Document number
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	wn on the records of the Florida Dept. of State:
Registered Agent:	Corporate Creations Network, Inc.
Registered Office Address:	11380 Prosperity Farms Road #221E
Registered Office Address.	Palm Beach Gardens, Florida
	33410
(b) Enter name of NEW Registered Agent and/	or NEW Registered Office address:
<u>NEW</u> Registered Agent:	Roland R. St. Louis, Jr.
NEW Registered Office Address:	Utopia Consultants, Inc
(MUST BE FLORIDA STREET ADDRES:	
	Coral Gables,FL_33134_
that after the change or changes are made, the Floric office of the registered agent will be identical. Or, i hereby confirmed that the change(s) was/were autholiability company or as otherwise provided in the arilimited liability company. (Signature of a member or authorized representative of a member)	der the laws of the State of Florida, it is hereby confirmed da street address of the registered office and the business in the case of a Florida limited liability company, it is prized by an affirmative vote of the members of the limite ticles of organization or the operating agreement of the
Richard T. Johnston	
(Printed or typed name of signee)	() term
I hereby accept the appointment as registered agen comply with the provisions of all statutes relative to am familiar with and accept the obligations of my perfect of the statutes of my perfect of the statutes of the statu	nt and agree to act in this capacity—It further agree to the proper and complete performance of my duites, and osition as registered agent as provided for in Chapter 60 flect a change in the registered office address, I hereby notified in writing of this change.