10700007817/

(Re	equestor's Name)	
(Ad	ldress)	
(A)	ldress)	
(1)	idiess)	
(Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	ısiness Entity Name)	· · · · · · · ·
•		
(Do	aumant Number	
(DC	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
	Timing Girloon.	
		a de la
		MU

Office Use Only



300109687713

09/24/07--01022--019 **25.00

SECRETATY OF STATE SECRETATY OF STATE

Lib Sir bi

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: All CITY ELE	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	g this matter to the following:
Emil Babayan (Name of Person)	
All CITY ELECTIC,	LLC SE
. 98 Loblloly Bay D	OT SEP 24 PM 12: CO
Santa Rosa Beach, Fl (City/State and Zip Code)	- 32459 - 32459
For further information concerning this mat	ter, please cail:
Emil Babayah (Name of Person)	at (818) 848 8045 (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	ng amount:
▼\$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.

ugeni, or boin, in the state of Pioriaa.
1. The name of the limited liability company is: All CITY Electric, LLC 2. The mailing address of the limited liability company is: 98 Loblloly Bay Drive.
2. The mailing address of the limited liability company is: 98 Loblloly Bay Drive
Santa Rosa Beach, FL 32459
July 30, 2007 3. Date of filing/registration in Florida Lo70000 78 7 4. Document number
4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Armen Minassian
Name -
98 Lobloly Bay Drive
Santa Rosa Beach, FL 32459 City, State and Zip
6. The name and address of the new registered agent and/or office:
6. The name and address of the new registered agent and/or office: Emil Babayan Name N
98 Lobloly Bay Drive
Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable) Santa bosa Bachel 32459
City, State and Zip
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.
Emit Babayan
(Signature of a member or authorized representative of a member)
Emil Baba'yan
(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.
(Signature of Registered Agost)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00