L08000004773

(Requestor's Name)				
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(Business Entity Name)				
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EXAMINER



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COVER LETTER

Division of Corporations				
21		2.0		
			cepts LLC	
Na	ime of Limited	l Liability C	ompany	
Dear Sir or Madam:				
The enclosed Registered Agent/Regis	stered Office (Change and	fee(s) are submitted for filing.	
Please return all correspondence cond	cerning this m	atter to the f	following:	
Aldon C. Adam	ns			
Name of Person				
Church Designs & Con-	cepts LLC			
Firm/Company				
255 Silver Lake R	Road			
Address				
ारामकः Palatka, Florida 3	9177			
City/State and Zip Code		·····		
\$ 1.00 m				
aldonc@aol.co E-mail address: (to be used for future annua	m			
E-mail address: (to be used for future annua	al report notification	on)		
For further information concerning th	nis matter, plea	ise call:		
C	•			
Aldon Adams	at (386)	328-4449	
Name of Person			Code & Daytime Telephone Number	
STREET/COURIER ADDRES	22.	MAITIN	G ADDRESS:	
Registration Section	36.	Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building		P.O. Box		
2661 Executive Center Circle		Tallahass	ee, Florida 32314	
Tallahassee, Florida 32301				
Enclosed is a check for the f	ollowing amo	unt:		
\$25 Filing Fee		\$55 Fil	ing Fee & Certified Copy	

INHS18 (5/08)

TO: Registration Section

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:	Church Designs & Concepts LLC			
2. (a) Principal office address of limited liability	company: 255 Silver Lake Road			
(Note: MUST BE STREET ADDRESS)	Palatka, FL 32177			
(b) Mailing address of limited liability compan	y: <u>255 Silver Lake Road</u>			
(Note: MAY BE POST OFFICE BOX)	Palatka, FL 32177			
January 15, 2008	L0800004773			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office sh	own on the records of the Florida Dept. of State:			
Registered Agent:	United States Corporation Agents, Inc.			
Registered Office Address:	13302 Winding Oaks Blvd. Suite A-100			
	Tampa, FL 33612			
(b) Enter name of NEW Registered Agent and	d/or NEW Registered Office address:			
NEW Registered Agent:	Aldon C. Adams			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES)				
•	Palatka ,FL 32177			
If the limited liability company is not organized un confirmed that after the change or changes are mad and the business office of the registered agent will liability company, it is hereby confirmed that the coff the members of the limited liability company or or the operating agreement of the limited liability of the l	le, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization company.			
Aldon C. Adams	<u> </u>			
Printed or typed name of signee	· ③ਜ —			
I hereby accept the appointment as registered age comply with the provisions of all statutes relative t and I am familiar with and accept the obligations of the control of the control of the control of the limited liability address, I hereby confirm that the limited liability is	nt and agree to act in this capacity. I further agree to o the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.			

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

Signature of Registered Agent