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COVER LETTER

TO: Registration Section Division of Corporations			
	ontractors LLC ited 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 m	natter to the following:		
Christine N. Failey (Name of Person)			
Andrioits Law Firm, P.A. (Firm/Company)	1		
1787 S. Pinellas Ave., Ste. 400 (Address)			
Tarpon Springs, FL 34689 (City/State and Zip Code)			
For further information concerning this matter, ple	ase call:		
Christine N. Failey at (_	727) 937-1400		
(Name of Person) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	(Area Code & Daytime Telephone Number) 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	☐ \$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. Nai	me of the limited liability company: Big Ten Cor	ntractors LLC	
2. (a)	Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>)	: 13785 Walsingham Road, Sui Largo, FL 33774	te 105
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	13785 Walsingham Road, Sui Largo, FL 33774	ite 105
01/15/2		L08000005106	APR 27
	e of filing/registration in Florida Registered Agent and Registered Office shown on the state of the the state o	 Document number the records of the Florida Dep 	t. of State:
	Registered Agent:	SPIEGEL & UTRERA, P.A.	DRIDE S
	Registered Office Address:	1840 SW 22ND ST. 4th Floor Miami, FL 33145	
(b)	Enter name of NEW Registered Agent and/or NEV	W Registered Office address	į.
	NEW Registered Agent:	Andriotis Law Firm, P.A.	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1787 S. Pinellas Avenue, Ste. 400	
	(MOST BET BOILDS STREET RESIDENCE	Tarpon Springs	,FL <u>34689</u>
that af office hereby liabilit limite	limited liability company is not organized under the lefter the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the cay confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	t address of the registered offi ase of a Florida limited liabilit	ice and the business
(Printed	ne N. Failey I or typed name of signee)	_	
	why accept the appointment as registered agent and a y with the provisions of all statutes relative to the provision with and accept the obligations of my position or, if this document is being filed to merely reflect a my that the limited liability company has been notified to the provision of Registered Agent).	gree to act in this capacity. I oper and complete performan as registered agent as provid change in the registered office I in writing of this change.	further agree to ce of my duties, and I ed for in Chapter 608, address, I hereby

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