108000007924

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PICK-UP	☐ WAIT	MAIL			
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Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					
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05/05/09--01043--003 **25.00



D. BRUCE
MAY 1 4 2009
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUB			al Cleaning Syste I Liability Company	ms, LLC	
Dear	Sir or Madam:				
The e	enclosed Registered Agent/Registered	Office (Change and fee(s) are	submitted f	or filing.
Pleas	e return all correspondence concernin	g this m	atter to the following:		
	Kathy A Hirst Name of Person			- '	·
	Eagles Commercial Cleaning Systems	tems, L	<u>LC</u>		Zo
	5650 Breckenridge Park Drive, S Address	Suite 10	<u>1</u>		ECRETARY LLAHASSE
	Tampa, FL 33610 City/State and Zip Code				PH 4: 28 OF STATE E. FLORIOA
E	mrshirst@verizon.net E-mail address: (to be used for future annual report	notification	on)		
For fi	urther information concerning this ma	tter, ple	ase call:		
	Kathy A Hirst	at (_	813) Area Code & Dayti	621-7072	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRI Registration Section Division of Corpora P.O. Box 6327 Tallahassee, Florida	ESS:	Number
	Enclosed is a check for the follow	ing amo	ount:		
	\$25 Filing Fee		\$55 Filing Fee &	Certified C	Сору



May 6, 2009

KATHY A. HIRST 5650 BRECKENRIDGE PARK DR, SUITE 101 TAMPA, FL 33610

SUBJECT: EAGLES COMMERCIAL CLEANING SYSTEMS, L.L.C.

Ref. Number: L08000007924

We have received your document for EAGLES COMMERCIAL CLEANING SYSTEMS, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 609A00015320

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:			
2. (a) Principal office address of limited liability company	Eagles Commercial Cleaning Syst		
(Note: MUST BE STREET ADDRESS)	5650 Breckenridge Park Drive, Suite 101 Tampa, FL 33610		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)			
5/1/09	L0800007924		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:		
Registered Agent:	Theodore J. Hirst, Jr		
Registered Office Address:	1908 Thornhill Road, #101 Wesley Chapel, Fl 33543		
(b) Enter name of NEW Registered Agent and/or NEV	V Registered Office address:		
NEW Registered Agent:			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5650 Breckenridge Park Drive Suite 101		
	Tampa, FL ,FL33610		
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote		
Kathy A Hirst Printed or typed name of signee	E		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my post Chapter 508, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete perfermance of my duties, sition as registered again as provided for in rely reflect a change in the registered office has been notified in writing of this change.		

FILING FEE: \$25.00

INHS18 (05/08)