## 410000008001

LAW OFFICES BOVAY & COOK, P.A. 901 N.W. 57TH STREET GAINESVILLE, FLORIDA 32605					
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SECRETARY OF STATE

AUG - A 2008 EXAMINER

## 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.

agent, or bont, in the bit	•	•	•		
1. The name of the lim	ited liability company is:	Whitcraft	Constructio	n, LLC	
2. The mailing address	of the limited liability cor	npany is: P.O.	Box <b>3</b> 58231		
Gainesville, FL		1		·	
4/10/2008		L080	L08000036614		
3. Date of filing/registr	ration in Florida	4. I	Document num'	ber	
5. The name of the regi Florida Department	stered agent and the regist of State:	ered office addre	ss as shown on	the records of the	
- :	Whiteraft, Dani	iel S.		野星二	
		Name	· <del></del>	調心芒	
	1134 N.W. 50th	Drive		麗一智	
· :		Address		常 宝	
,	Gainesville, FL 32605			T. 7	
. :	City, State and Zip			BAUG-7 MA:00	
6. The name and addre	ss of the new registered ag	ent and/or office:	•	Sm -	
	Bovay, John Ç.	•			
. :	Name 901 NW 57th Street				
	Florida street address	(P.O. Box NOT	acceptable)		
	Gainesville	FL 32	605		
		State and Zip	i .		
confirmed that after the and the business office liability company, it is of the members of the	company is not organized e change or changes are me of the registered agent we hereby confirmed that the limited liability companyment of the limited liability	iade, the Florida s ill be identical. C e change(s) was/v or as otherwise s	street address o br. in the case o	t the registered office of a Florida limited	
(Signature of a member or a	uthorized representative of a mem	iber)			
Jahn C Pova	. i				
John C. Boya (Printed or typed same of si	ignee)				
I hereby accept the a comply with the provi and I am familiar wit Chapter 6089 F.S. Or address I hereby con	ppointment as registered a sions of all statutes relative h and accept the obligation if this document is being firm that the limited liabil	igent and agree to the to the proper ains ns of my position filed to merely re ity company has t	o act in this cap nd complete pe as registered a eflect a change been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.	
	·	<del></del>		, i	
(Signature of Registered A	gent) ,		•		
Div	vision of Corporations, P	.O. Box 6327, Ta	allahasseé, FL	32314	
INT(S18(10/99)	FILI	NG FEE: \$25.00			