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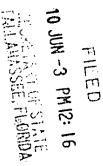
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S. HAWKES

JUN 0 4 2010

EXAMINER

COVER LETTER

Division of Corporations East Coast Sealcoat & Stripe SUBJECT: Name of 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 this matter to the following: Travis W Matheny Name of Person East Coast Sealcoat & Stripe Firm/Company 3071 Dover Road Address Mims, FL 32754 City/State and Zip Code TMatheny5@cfl.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Travis W Matheny 321 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee \$55 Filing Fee & Certified Copy

: TO:

Registration Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

e Pursuant to the provisions of sections 608.416 or 608 liability company submits the following statement in or agent, or both, in the State of Florida.	der to change its registered office ör registered	
1. Name of the limited liability company:	East Coast Sealcoat & Stripe	
2. (a) Principal office address of limited liability compa	ny: 3071 Dover Road	
(Note: MUST BE STREET ADDRESS)	Mims, FL 32754	
(b) Mailing address of limited liability company:	3071 Dover Road	
(Note: MAY BE POST OFFICE BOX)	Mims, FL 32754	
May 08, 2008	L08000046280	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. of State:	
Registered Agent:	United States Corporation Agents, Inc	
Registered Office Address:	320 S. Flamingo Road	
	Pembroke Pines, FL. 33027	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:	
NEW Registered Agent:	Travis W Matheny	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3071 Dover Road	
	Mims ,FL32754	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company. Signature of a member or authorized representative or a member	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote erwise provided in the articles of organization	
Travis W Matheny Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to haddress, I hereby confirm that the limited Hability companions of Registered Agent	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office my has been notified in writing of this change.	
Division of Corporations, P.O. Box (FILING FEE:		