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SECRETARY OF STATE

S. HAWKES

JAN 2 6 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	UBJECT: CARPET SPECIALIST L.L.C. Name of Limited Liability Company			
Dear S	Sir or Madam:			
The en	nclosed Registered Agent/Register	ed Office Change and fee(s) are submitted for filing.		
Please	return all correspondence concern	ing this matter to the following:		
	DENNIS MICHAEL MAH Name of Person	ANEY		
	CARPET SPECIALIST L Firm/Company	.L.C.		
	2634 TAMIAMI TRAIL NOF	TH B39		
	NAPLES,FLORIDA 34 City/State and Zip Code	103		
E-	DENMIMAH@AOL.Co	Oort notification)		
For fu	rther information concerning this	natter, please call:		
	DENNIS MICHAEL MAHANEY	at (248) 894-7060		
	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 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following amount:				
1	\$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. Name of	the limited liability company:	CARPET SPECIALIST L.L.(<u> </u>	
2. (a) Princ	cipal office address of limited liability comp	any: 2634 TAMIAMI TRAIL	. NORTH B39	
_[<u>\lambda</u>](<u>No</u>	te: MUST BE STREET ADDRESS)	NAPLES,FLORIDA 34103		
(b) Mail	ing address of limited liability company:	2634 TAMIAMI TRAIL	NORTH B39	
- ✓ - (<u>No</u>	te: MAY BE POST OFFICE BOX)	NAPLES,FLORIDA 34103		
	1/29/2009	L09000009375	₹ <u>→</u>	
3. Date of f	iling/registration in Florida	4. Document number		
5. (a) Reg	istered Agent and Registered Office shown	on the records of the Florida Dept. o	JAN 25	
Regi	istered Agent:	DENNIS MICHAEL MAHANI	EY	
Regi	stered Office Address:	5021 LIVE OAK CIRCLE	2 S S S S S S S S S S S S S S S S S S S	
		BRADENTON, FLORIDA 342	207 學術 🙃	
<u>NEV</u>	<u>V</u> Registered Agent:			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		2634 TAMIAMI TRAIL NORT	2634 TAMIAMI TRAIL NORTH B39	
		NAPLES ,F	L <u>34103</u>	
confirmed the	d liability company is not organized under that after the change or changes are made, the ness office of the registered agent will be idenary, it is hereby confirmed that the change oers of the limited liability company or as of this agreement of the limited liability company.	e Florida street address of the registe	ered office	
	Ments Michael Makanember of a unember	7		
	WIS MICHAEL MANAS	27		
	d name of signee			
I hereby accomply with and I am far Chapter 608 address, I ha	cept the appointment as registered agent an the provisions of all statutes relative to the miliar with and accept the obligations of my B, F,S. Or, if this document is being filed to ereby confirm that the limited liability comp	d agree to act in this capacity. I fur proper and complete performance of position as registered agent as prov merely reflect a change in the regist any has been notified in writing of t	ther agree to of my duties, vided for in vered office his change.	

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

Signature of Registered Agent