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COVER LETTER

Division of Corporations	
	·
SUBJECT:	A&L Brother's Roofing,LLC
N	ame of Limited Liability Company
	·
Dear Sir or Madam:	•
The enclosed Registered Agent/Reg	istered Office Change and fee(s) are submitted for filing.
Diagram all games and access	in-a this matter to the fallowing.
riease return an correspondence cor	ncerning this matter to the following:
Anibal Mejia	3
Name of Person	
A P L Depthoda Dopfi	ing LLC
A&LBrother's Roofi Firm/Company	irig,LLC
1 mil company	
•	
750 South Orange Blossom	ı Trail, Suite 239
Address	
Orlando, FI 320	805
City/State and Zip Code	
-	
anihalm@albratharana	ofinalla aom
anibalm@albrothersroo E-mail address: (to be used for future annu	ual report notification)
·	•
For further information concerning t	this matter, please call:
Anibal Mejia	at (321) 202-4251
Name of Person	at (321) 202-4251 Area Code & Daytime Telephone Number
STREET/COURIER ADDRE	
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
i ananassee, i longa 52501	
Enclosed is a check for the	following amount:
A cos pie p	These private and the second
\$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

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:	A&L Brother's Roofing, LLC
2. (a) Principal office address of limited liability co	mpany: 750 South Orange Blossom Trail
(Note: MUST BE STREET ADDRESS)	Suite 239 Orlando, Fl 32805
(b) Mailing address of limited liability company:	750 South Orange Blossom Trail
(Note: MAY BE POST OFFICE BOX)	Suite 239 Orlando, Fl 32805
May 14, 2009	L09000047232
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:
Registered Agent:	Anibal Mejia
Registered Office Address:	750 South Orange Blossom Trail
	suite 239 Orlando, Fl 32805
(b) Enter name of <u>NEW Registered Agent</u> and/o <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u> Office Address:	Blanca Zelaya 750 South Orange Blossom Trail
(MUST BE FLORIDA STREET ADDRESS	Orlando ,FL32805
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the charge of the members of the limited liability company or as or the operating agreement of the limited liability confirmed that the charge of the operating agreement of the limited liability confirmature of a member of authorized representative of a member and liability confirmation to typed name of signee. I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability confirmation is the limited liability confirmation.	the Florida street address of the registered office e identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote so otherwise provided in the articles of organization mpany.
address, I hereby confirm that the limited liability confirm that the limited liabilit	-
orbining of trekisiered tribuit	

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