## L0900000001141

LITUU
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200251133562

08/28/13--01006--013 \*\*25.00

4

2813 AUG 28 AM 8: 42

J. SAULSBERRY EXAMINER SEP 3 2012

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: TRA	N CONSTRUCTION  Name of Limite	FCL BUILDERS T	V, LLC
Dear Sir or Madam:			
The enclosed Registere	ed Agent/Registered Office	Change and fee(s) are submitted for	filing.
Please return all corres	pondence concerning this m	natter to the following:	
TOE ARE	RREH Name of Person	<del></del>	
TRAN CONSTR	EVETION FCL BUI	LDERS IV, LLC.	
PO BOX 370	337	· 	2013 AUG
4.4	Address  33137  /State and Zip Code	<del></del>	JS 28 AM 8: 42
E-mail address: (to be u	sed for future annual report notificati	ion)	***
For further information	n concerning this matter, ple	ease call:	
TOE ARERA Name of I	ZEH at (_	954 263 B211  Area Code & Daytime Telephone No.	umber
STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, Flo	porations B Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
\ <b>A</b>	check for the following am	ount:	
\$25 Filing F	'ee	\$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.

· · · · · · · · · · · · · · · · · · ·	t 14 to 2111 TUIL
1. Name of the limited liability company: Tran Cove	
2. (a) Principal office address of limited liability company	y: 1835 E Hallandale Boh Blud
(Note: MUST BE STREET ADDRESS)	Hallandale FL 33009
(b) Mailing address of limited liability company:	PO Box 370337
(Note: MAY BE POST OFFICE BOX)	HIAMI, FL 33137
07/12/2009	109000067141
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Henry Lorden
Registered Office Address:	POBOX 370337
	MIAMILE 33137
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NE</b>	W Registered Office address:
NEW Registered Agent:	JOE AREPREH
<b>NEW</b> Registered Office Address:	1835 = Hallandale Bdi Blud
(MUST BE FLORIDA STREET ADDRESS)	Hallandale ,FL 3300
If the limited liability company is not organized under the	laws of the State of Florida, it is hereby
confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden	tical. Or, in the case of a Florida limited
liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherwithe operating agreement of the limited liability company.	) was/were authorized by an affirmative vote of
the operating agreement of the limited liability company.	ise provided in the difference of organization of
(de Andre	
Signature of a member or authorized representative of a member	- 28 × 28
JOE ARE RREH	<b>2</b>
Printed or typed name of signee	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pr and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	
Signature of Registered Agent	

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

INHS18 (05/08)