

L09000072066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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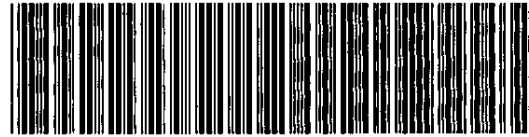
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN

NOV - 2 2010

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Suncoast Roofers LLC.  
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:

Bruce Rubin  
Name of Person

Suncoast Roofers LLC.  
Firm/Company

7011 Land O' Lakes Blvd  
Address

Land O' Lakes FL 34638  
City/State and Zip Code

BDR001@ aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce Rubin at ( 813 ) 943-3860  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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**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: Suncoast Roofers LLC.

2. (a) Principal office address of limited liability company: 7011 Land O' Lakes Blvd



**(Note: MUST BE STREET ADDRESS)**

Land O' Lakes FL 34638

(b) Mailing address of limited liability company:



**(Note: MAY BE POST OFFICE BOX)**

7011 Land O' Lakes Blvd

Land O' Lakes FL 34638

07-29-09

3. Date of filing/registration in Florida

L09000072066

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Bruce Rubin

Registered Office Address:

8826 Handel loop  
Land O'Lakes FL 34637

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

Thomas DeCleene

**NEW** Registered Office Address:

7011 Land O' Lakes Blvd

**(MUST BE FLORIDA STREET ADDRESS)**

Land O' Lakes, FL 34638

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 Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Bruce Rubin  
Signature of a member or authorized representative of a member

Bruce Rubin

Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity and further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Bruce Rubin  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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