109000.104552

(Requestor's Name)
(requestors riams)
(Address)
(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:
Special mandalons to 1 ming officer.

Office Use Only



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05/12/10--01019--004 **25.00

TO MAY 12 AM UT- 52

D. BRUCE

MAY 13 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Harbor City Co	MACKING LLC Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for	or filing.
Please return all correspondence concerning this ma	atter to the following:	
Name of Person		
Firm/Company		2 <u>4</u> =
	·	A A
Address		7
0'- 0'- 12'- 0 1-		Tes E III
City/State and Zip Code		D #: 52 STATE LORAD
E-mail address: (to be used for future annual report notification	on)	A
For further information concerning this matter, plea	ase call:	
	221 017 Foll	
Name of Person at (321 <u>917-5584</u> Area Code & Daytime Telephone N	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 amo	ount:	
\$25 Filing Fee	\$55 Filing Fee & Certified C	Сору

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

Pursuant to the provisions of sections 608.416 or 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited r to change its registered office or registered		
1. Name of the limited liability company: Harbor	City Contracting LLC		
2. (a) Principal office address of limited liability company			
(Note: MUST BE STREET ADDRESS)	1231 SE Devoted St Palm Bay FL 32909		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)	1231 SE Devoted St Palm Bay FL 32909		
11/4/09	L09000106552		
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:	Diana Mercer		
Registered Office Address:	1231 SE Devoted St		
	Palm Bay Fl 32909		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1073 Sheridan Woods Dr.		
	W. Melbourne FL 32904		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization		
Signature of a member or authorized representative of a member			
Printed or typed name of signee	- S		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro 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	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.		

Signature of Registered Agent