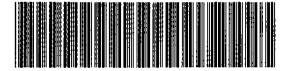
L10000024817

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	÷#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



800211672028

09/02/11--01025--010 **25.00

FILED

1 SEP -2 PM I2: I

COREJANY OF STALL

COVER LETTER

TO: Registration Section

INHS18 (5/08)

Division of Corporations					
SUBJECT:	Chief En	aine	erina a	and In	tegration
SUBJECT: Chief Engineering and Integration Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered A	gent/Registered C	Office (Change	and fee	e(s) are submitted for filing.
Please return all correspond	lanca concarning	thic m	attar ta	the fol	lowing:
r rease return an correspond	iche concerning	uno m	auci io	the for	lowing.
	G. Chosa				
Name	of Person				
Chief Enginee	ring and Integrat	tion			
Firm/6	Company	,			
1050 Bli	uegrass Lane				
	lress				
Dooklad	FL 22055				
	ge, FL 32955 and Zip Code				
Chy/Sum.	and zip cooc				
shipf anaissasing		a:l aau	_		
Chief.engineering. E-mail address: (to be used to	r future annual report no	otificatio	n)	_	
For further information cor	cerning this matte	er, ples	se call	:	
Peter G. Ch	osa	at (_	321	•	446-2617
Name of Person		. *** (Area Cod	e & Daytime Telephone Number
	ADDDESS		3.5 4	II ING	A DDDECC.
STREET/COURIER Registration Section	R ADDRESS:	MAILING ADDRESS: Registration Section			
Division of Corporati	ons	Division of Corporations			
Clifton Building	····			Box 63	
2661 Executive Center	er Circle				, Florida 32314
Tallahassee, Florida 3			1 431		g a tweeter warw 4 1
Enclosed is a checl	k for the followin	g amo	unt:		
\$25 Filing Fee			5 \$5	5 Filing	g Fee & Certified Copy
<u> </u>				7	•

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:	Chief Engineering and Integration LLC
2. (a) Principal office address of limited liability of	ompany:
(Note: MUST BE STREET ADDRESS)	1050 Bluegrass Lane Rockledge, FL 32955
(b) Mailing address of limited liability company	· · · · · · · · · · · · · · · · · · ·
(Note: MAY BE POST OFFICE BOX)	1050 Bluegrass Lane Rockledge, FL 32955
March 5, 2010	L1000002481
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Dept. of State:
Registered Agent:	Peter G. Chosa
Registered Office Address:	3909 Upmann Drive Rockledge, FL 32955
(b) Enter name of <u>NEW Registered Agent</u> and <u>NEW Registered Agent</u> :	or NEW Registered Office address: Peter G. Chosa
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRES)	S) 1050 Bluegrass Lane Rockledge ,FL32955
If the limited liability company is not organized und 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 chof the members of the limited liability company or a or the operating agreement of the limited liability confirmed that the chof the operating agreement of the limited liability confirmed that the chof the operating agreement of the limited liability confirmed that the chof the operating agreement of the limited liability confirmed that the chof	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited lange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization
Pt 7ER G. CHOSA Printed or typed name of signee	
I hereby accept the appointment as registered agen 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 co	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, I my position as registered agent as provided for in a to merely reflect a change in the registered office ompany has been notified in writing of this change.
Patr & Ch. Signature of Registered Agent	<u>-</u>

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