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S. HAWKES

MAY 2 4 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: M+m SANTANA S	ERVICES LLC d Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Office	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this m	atter to the following:		
Michael J Santana Name of Person	·		
M+m Santana Services LL Firm/Company	C		
3562 Emerywood Lanc			
Orlando FL 32812 City/State and Zip Code			
misartana @ CFL. RR. com Hmail address: (to be used for future annual report notification	on)		
For further information concerning this matter, plea	ase call:		
Michael J Santana at (at (407) 963-7/08 Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301	1 ananassee, 1 10110a 32314		
Enclosed is a check for the following amount:			
\$25 Filing Fee	\$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.

1. Name of the limited liability company: M+m Sa	ntana Services LLC
2. (a) Principal office address of limited liability company	·
(Note: MUST BE STREET ADDRESS)	356d Energymod tank To
(b) Mailing address of limited liability company:	To see the second
(Note: MAY BE POST OFFICE BOX)	3562 Emerywood Care To Orlando FL 328/2 97 0
April 20, 20/0 3. Date of filing/registration in Florida	<u>L/00000 423/3</u> 4. Document number
5. (a) Registered Agent and Registered Office shown on t	
Registered Agent:	michael J Santana
Registered Office Address:	3562 Emerywood Lane Orlando Pt 32812
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	V Registered Office address:
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	V Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2898 South Osceola Avenue Orlando ,FL 32806
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl 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	aws of the State of Florida, it is hereby orida 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.
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 proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

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

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

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5,,	•
1. Name of the limited liability company: <u>M+M So</u>	entanu Services LLC
2. (a) Principal office address of limited liability compan	
(Note: MUST BE STREET ADDRESS)	3562 Energywood France (Dolando FL 31812 7
(b) Mailing address of limited liability company:	22 PR
(Note: MAY BE POST OFFICE BOX)	Orlando FL 328120 :
April 20, 2010 3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	
Registered Agent:	michael J Sestana
Registered Office Address:	Orlando Ft 31812
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2898 South Oscenla Avenue Orlando FL 32806
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 identiability 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. Signature of a member or authorized representative of a member	laws of the State of Florida, it is hereby lorida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote rwise provided in the articles of organization
m=1/17C /	
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 prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company.	igree 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	

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