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EXAMINER

COVER LETTER

Registration Section

Division of Corporations SOUTH FLORIDA CONSTRUCTION CONNECTION, 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: JOSEPH L SPADA Name of Person SOUTH FLORIDA CONSTRUCTION CONNECTION Firm/Company 3141 SE LEXINGTON LAKE DRIVE, UNIT 102 Address STUART FL 34994 US City/State and Zip Code SPADA_JOSEPH@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOSEPH L SPADA Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida, 32314 Tallahassee, Florida 32301 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

4

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.

LORIDA CONSTRU	JCTION CONNEC
any:	
3141 SE LEXINGTO STUART FL 34994	ON LAKE DRIVE, UN US
3141 SE LEXINGTO STUART FL 34994	ON LAKE DRIVE, UN US
L10000	060438
4. Document number	
on the records of the Flori	da Dept. of State:
MICHAEL T GRECZ	
2660 SE 13TH COURT POMPANO BEACH, FL 33062	
JOSEPH L SPADA 3141 SE LEXINGTON LAKE DRIVE	
	,FL34994
ne laws of the State of Flore Florida street address of entical. Or, in the case of entical. Or, in the case of e(s) was/were authorized between the provided in the arany. d agree to act in this capacity of the entire proper and complete performed by reflect a change in any has been notified in warm of the entire of the e	the registered office a Florida limited by an affirmative vote ticks of organization LAHASSEE, FLORAL forther garge to
	3141 SE LEXINGTO STUART FL 34994 10000 4. Document number on the records of the Florion MICHAEL T GRECO 2660 SE 13TH COUPOMPANO BEACH DOSEPH L SPADA 3141 SE LEXINGTO UNIT 102 STUART The laws of the State of Florion E Florida street address of the Florida street address of the State of Flor

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