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## **COVER LETTER**

TO: Registration Division of	Section Corporations			;		
SUBJECT:	UBJECT: Appliance Installation Professionals, LLC  Name of Limited Liability Company					
	144110 01	Dimitod	Diability C	ompany		
Dear Sir or Madam	:					
The enclosed Regis	tered Agent/Registered	Office C	hange and f	fee(s) are submitted for filing.		
Please return all co	rrespondence concernin	g this ma	tter to the fo	ollowing:		
	David W. Eaton					
	Name of Person					
Appliance I	nstallation Profession Firm/Company	ials, LLC	;			
	4404 Gilpin Way		<u> </u>			
	Orlando, Fl. 32812 City/State and Zip Code		<del> </del>			
applia E-mail address: (to	nceinstallpro@gmail.d	com notification	<del>)</del>			
For further informa	tion concerning this ma	tter, pleas	se call:			
David	l W. Eaton	at (	407 )	409-9986		
Name	of Person	· · ·	Area Co	ode & Daytime Telephone Number		
<b>CTDFFT</b> /€/	OURIER ADDRESS:		MATERIA	C ADDDESS.		
Registration S		MAILING ADDRESS: Registration Section				
Division of C		Division of Corporations				
Clifton Build	ing	P.O. Box 6327				
2661 Executi Tallahassee, l	ve Center Circle Florida 32301		Tallahasse	ee, Florida 32314		
Enclosed is	a check for the follow	ing amou	int:			
<b>✓</b> \$25 Filing	g Fee	[	\$55 Fili	ng 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.

Name of the limited liability company:Appliane	ce Installation Professionals, LLC		
2. (a) Principal office address of limited liability company	132 Kaywood Dr.		
(Note: MUST BE STREET ADDRESS)	Sanford, Fl. 32771		
(b) Mailing address of limited liability company:	same		
(Note: MAY BE POST OFFICE BOX)			
July 12, 2010	L10000074325		
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:	John J. Wojcik		
Registered Office Address:	132 Kaywood Dr. Sanford, Fl. 32771		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	M Registered Office address:  Deborah K. Eaton  4404 Gilpin Way  Orlando.  ARE NOV  AND STATE OF STATE		
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  Signature of a member or authorized representative of a member  David W. Eaton Mgrm	laws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote		
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 province of and I am familiar with and accept the obligations of my poor Chapter 608, F.S. Or, if this document is being filed to me 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 rely 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