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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUL 26 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ	ECT: Hammerhead Cons Name o			opment y Compan		Iting, LL	<u>C</u>	
Dear :	Sir or Madam:							
The e	nclosed Registered Agent/Registered	d Office	Change a	nd fee(s) a	re submitte	d for filing		
Please	e return all correspondence concernir	ng this m	atter to tl	ne followir	ng:			
	Robert Yanchis Name of Person							
	Hammerhead CDC Firm/Company	· <u>-</u>			,			
	P.O. Box 290985 Address	· · · · · · · · · · · · · · · · · · ·	* · · · · · · · · · · · · · · · · · · ·	ann an t	14 J	SECRET TALLAHA	11 JUL	Low
	Dark Orange El 20100					ARY SSE	25	*****
	Port Orange, FL 32129 City/State and Zip Code	1	٠,,		* * *	OF ST		
E	r.yanchis@hammerheadcdc	c.com	on)			ATE		
For fu	rther information concerning this ma	atter, ple	ase call:					
	Robert Yanchis	at (772)	633-89	85		
	Name of Person		Ar	ea Code & Da	aytime Telepho	ne Number		
	STREET/COURIER ADDRESS:		MAII	LING ADD	DESS.			
	Registration Section			tration Sect				
	Division of Corporations Division of Corporations							
	Clifton Building P.O. Box 6327							
	2661 Executive Center Circle		Tallah	nassee, Flor	ida 32314			
	Tallahassee, Florida 32301							
	Enclosed is a check for the follow	ving amo	unt:					
	▼ \$25 Filing Fee	•• •		Filing Fee	& Certified	d Copy		

INHS18 (5/08)

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: Hammerhea	ad Construction Development Consu						
2. (a) Principal office address of limited liability company	y: 746 Big Tree Rd.						
(Note: MUST BE STREET ADDRESS)	South Daytona, FL 32119						
(b) Mailing address of limited liability company:	P.O. Box 290985						
(Note: MAY BE POST OFFICE BOX)	Port Orange, FL 32129						
9/29/2010	L10000101911						
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:	Michael August						
Registered Office Address:	283 Cranes Roost Blvd Suite 111 Altamonte Springs, FL 32701						
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address?							
NEW Registered Agent:	Robert Yanchis						
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	746 Big Tree Rd. DE South Daytona ,FL32119						
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Robert Yanchis Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608 F.S. Or, if this document is being filed to merely reflect a change in the registered office address I have by fonfirm that the limited liability company has been notified in writing of this change.							
address, Thereby confirm that the fimited liability company) has been notified in writing of this change.						

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