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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: DL6 General Construction 22C		
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:		
Juis F Chavarriaga Name of Person		
DL6 General Construction 26c		
7566 Garibaldi C+		
Naples FL 34114 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Luis F Chavarriaga at (239) 200-3848 Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	

□ \$55 Filing Fee & Certified Copy

□ \$25 Filing Fee

Enclosed is a check for the following amount:

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.

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1. Name of the limited liability company: DL6	General construction 220
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	Naples FX 34114
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	7566 Garibaldi ct Naples FL 74114
11/10/2010.	L 10000117255
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Luis & Chavarriaga
Registered Office Address:	Luis F Chavarriaga 7566 Garibaldi d Naches FL 34114
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> : NEW Registered Office Address:	5911 Star grass Ln
(MUST BE FLORIDA STREET ADDRESS)	Naples FL 34116.
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 at is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized epresentative of a member	orida street address of the fegistered office
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided and I am familiar with and accept the obligations of my postable to the provided to the 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 whas 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