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COVER LETTER

TO: Registration Section Division of Corporations

CAMZG, LLC SUBJECT:

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:

STEPHEN MCGANN

Name of Person

P.A.V.C.O. CONTRACTING GROUP, LLC

Firm/Company

1928 DAIRY ROAD

Address

WEST MELBOURNE, FL 32904

City/State and Zip Code

Kristin@pavcollc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristin Pistilli

Name of Person

951-2052 ext. 0

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

,321____

at (

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

2 \$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 605.0114 or 605.0116. 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. Na	me of the limited liability company:			
2. (a)	1905 AIRPORT BLVD	(b) 1905 AIRPORT BLVD.		
2. (u)	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)			Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1905 AIRPORT BLVD.		1905 AIF	RPORT BLVD.
	MELBOURNE, FL 32901	_	MELBOU	JRNE, FL 32901
		I	_1100000	06223
3. 5. (a)	Date of filing/registration in Florida FRESE, GARY B	4.		Document number
. ()	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat 2200 FRONT STREET, SUITE 301, MELBOURNE, FL 3290			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 2200 FRONT STREET, SUITE 301			
	MELBOURNE	32901		•
(b)	STEPHEN MCGANN Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			APR 2
	1928 DAIRY ROAD, WEST MELBOURNE, FL 32904			29 P
	NEW Registered Office Address:			·
	1928 DAIRY ROAD			(法) (法) (法) (法) (法) (法) (法) (法) (法) (法)
	WEST MELBOURNE FL	32904		
the cha agent v was/we the arti Signal	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l where of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provided affy reflect a change in the registered office address. I h	the regis bility co f the limi limited li	tered office mpany, it is ted liability ability com	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany. CPEN MARKAN Printed or typed name of signee ucity. I further agree to comply with the

Signature of Registered Agent

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