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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Central Steel Fabru Name of Limited Lie	cators, LLC ability 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:			
Ernest C. Raynor, III Name of Person	_		
Central Steel Fabricators, LLC Firm/Company			
2144 Soutel Brive Address			
Jacksonville, FL 32208 City/State and Zip Code			
E-mail address: (to be used for thiure annual report notification)			
For further information concerning this matter, please call:			
Ernest C. Raynor III at (386 Name of Person) 846 - 1208 Area Code & Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

☐ \$55 Filing Fee & Certified Copy

S25 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 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. Name of the limited liability company: Central Steel Fo	bricators, LLC
Principal office address of limited liability company: Ma	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Jacksonville, FL 32208 Jac	ksonville, FL 32208
	2008225 Document number
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 9509 Valerie St. Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
Tacksonville , FL 32208 (b) Ernest C. Raynor, III Enter name of NEW Registered Agent and/or NEW Registered Office address:	SECRETAR SON OF C 2023 JUL 27
2207 Knowles Road NEW Registered Office Address:	ILED CARPORATIONS 7 PM 9: 24 1
Green Cove Springs FL 32043	.,
If the limited liability company is not organized under the laws of the State of Flori change or changes are made, the Florida street address of the registered office and t agent will be identical. Or, in the case of a Florida limited liability company, it is h was/were authorized by an affirmative vote of the members of the limited liability of the articles of organization or the operating agreement of the limited liability compa	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Signature of a member or authorized representative of a member P	T. Guffell Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to act in this capacity provisions of all statutes relative to the proper and complete performance of my due the obligations of my position as registered agent as provided for in Chapter 605. It to merely reflect a change in the registered office address, I hereby confirm that the notified in writing of this change.	ity I further agree to comply with the

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

Ernest C.Raynor, 111
Signature of Registered Agent