

Sep 01 2011 3:48PM
Division of Corporations

NASON YEAGER GERSON WHITE 5614710894

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LLC REGISTERED AGENT CHANGE
DIVISION #7 SPECIALTY CONTRACTORS LLC

A. LUNT

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EXAMINER

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ROBERT DESILVA

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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: Division #7 Speciality Contractors LLC

2. (a) Principal office address of limited liability company: _____

(Note: **MUST BE STREET ADDRESS**)1805 Ponce De Leon Apt. # 900
Coral Gables, FL 33134

(b) Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**)1805 Ponce De Leon Apt. # 900
Coral Gables, FL 3313403/03/2011

3. Date of filing/registration in Florida

L1100002667

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Corporation Service Company

Registered Office Address:

1201 Hays Street
Tallahassee, FL 32301(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:**NEW Registered Agent:**Gary N. Gerson, Esq.**NEW Registered Office Address:****(MUST BE FLORIDA STREET ADDRESS)**1645 Palm Beach Lakes Blvd
Suite 1200West Palm Beach, FL 33401

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.

Vicki Desilva
Signature of a member or authorized representative of a member

VICKI DESILVA
Printed or typed name of signer

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. Only this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

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