LIIDOULACOO

(Requestor's Name)		
(Ac	ldress)	<u> </u>
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	ocument Number)	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
APR 11 2012		
L. S ELLERS		

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COVER LETTER

Division of Corporations			
SUBJECT: WEECH ENVIRONMENTAL & CONSULTING, LLC 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:			
C. N. EHAN WEECH Name of Person			
WEELH ENVIRONMENTAL & CONSULTING Firm/Company			
P. O. Box 770328 Address			
WINER GARDEN FL 34777 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
EHAN WEECH at (239) 233 - 9007			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section			
Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$25 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 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.

agent, or both, in the blace of a torical.	
1. Name of the limited liability company: WEECH E	NVIRONMENTAL & CONSULTING
2. (a) Principal office address of limited liability company	: 416 LAKE AMBERLETGH DR
(Note: MUST BE STREET ADDRESS)	WINTER CEARDEN, FL 34787
(b) Mailing address of limited liability company:	P.O. BOX 770328
(Note: MAY BE POST OFFICE BOX)	WINTER GARDEN, FL 34777
3. Date of filing/registration in Florida	L 11000066006 4. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	ARISTIDES J. DIAZ
Registered Office Address:	ORLANDO, FL 32804
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> : NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NATALIE J. MARTIN WELCH 1516 EAST COLONIAL DR, STE 202
If the limited liability company is not organized under the legistered that after the change or changes are made, the Fl and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company Signature of a member or authorized representative of a member TRANTILE NEW CHAN WEECH Printed or typed name of signee I hereby accept the appointment as registered agent and agent a	aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.

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

Signature of Registered Agent