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(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Commercial Coatings & Wall Coverings, 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:

Tammy L. Bell

Name of Person

Commercial Coatings & Wall Coverings, LLC

Firm/Company

612-H 17th St E

Address

Palmetto, FL 34221

City/State and Zip Code

admin@commercialcw.com

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

For further information concerning this matter, please call:

Tammy L. Bell

_{a, 4}07

694-3574

Name of Person

Area Code & Daytime Telephone Numbe

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

\$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 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: Commercial Coating	s & Wall Coverings, LLC	
2. (a) Principal office address of limited liability compa	insy: 612-H 17th St E	
(Note: MUST BE STREET ADDRESS)	Paimetto, FL 34221	
(170505 171 001 201 01 112211 112211300)		
(b) Mailing address of limited liability company:	612-H 17th St E	
(Note: MAY BE POST OFFICE BOX)	Palmetto, FL 34221	
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		79 7
6/7/11	L11000066663	
3. Date of filing/registration in Florida	4. Document number	2: 37
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida D	- · · · · · · · · · · · · · · · · · · ·
Registered Agent:	Gregory A Grover	
Desistand Office Address.	9708 Dunden Men	
Registered Office Address:	8706 Dundee Way Orlando, FL 32817	
	311111111111111111111111111111111111111	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office addr	ess:
<u>NEW</u> Registered Agent:	Gregory A Grover	
NEW Registered Office Address:	612-H 17th St E	
(MUST BE FLORIDA STREET ADDRESS)		
	Palmetto	,FL 34221
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the sentical. Or, in the case of a Fl (s) was/were authorized by ar wise provided in the articles of	registered office orida limited affirmative vote of
Gregory A Grover Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity proper and complete perform position as registered agent a merely reflect a change in the any has been notified in writi	I further agree to ance of my duties, is provided for in registered office ng of this change.

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