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(Requestor's Name)		
(Address)		
(Address)		
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PICK-UP WAIT MAIL		
(Dusinger Fath, Name)	_	
(Business Entity Name)		
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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Division of Corporations
SUBJECT: <u>Zechiel Construction LLC</u> Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
LUKE & Zechiel
. Name of Person
Zechiel Construction LLC Firm/Company
32 Highpoint Dr. Address
GUIF Breeze, FL 32561 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jennifer Zechiel at (850) 982-4870
Name of Person Area Code & Daytime Telephone Number
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:
□ \$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.

Florida.	
Name of the limited liability company: Zechiel	Construction LLC
2 (a) 9920 Rebei Rd	(b) 9920 Rebei Rd
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Pensacola, PC	Pensacola, FL
32526	39526
8 23 2011	L11000096906
Date of filing/registration in Florida	4. Document number
s. (a) LUKE K Zechill	Cho Florido Dent of State:
Registered Agent and Registered Office shown on the records of	the Profita Dept. of State.
QQ20 Kebel Ka Registered Office Address (MUST BE FLORIDA STREET	ADDRESS) 9
	ASSOCIATION OF THE PROPERTY OF
Q 10 0 10 10 10	The Florida Dept. of State: ADDRESS) ADDRESS
tensacola, FI	- 33 35 - FEE 35
(b) LUKE K. Zechiel	
Enter name of NEW Registered Agent and/o NEW Registered	1 Office address:
32 Highpoint Drive	
NEW Registered Office Address:	
Gulf Breeze, FI	1_30561
If the limited liability company is not organized under the la	iws of the State of Florida, it is hereby confirmed that after
the change or changes are made, the Florida street address of a great will be identical. Or, in the case of a Florida limited 1	iability company, it is hereby confirmed that the change(s)
was/were authorized by an affirmative vote of the members the articles of organization or the operating agreement of the	of the limited liability company or as otherwise provided in
All he key 20 h 110	Jennifer Zechiel Printed or typed name of signee
Ignature of a member or authorized representative of a member	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provid	gree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and accept ed for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been
to merely reflect a change in the registered office address, I notified in writing of this change.	nevery confirm that the timited tidotity company has been
Signature of Registered Agent	·

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