## L12000120042

(Re	equestor's Name)			
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PICK-UP	WAIT	MAIL		
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## **COVER LETTER**

TO:

Registration Section

Divi	sion of Corporations				
SUBJECT:	Infrared Building Diagnostics, LLC				
Sebone I.	Name of Limited Liability Company				
Dear Sir or N	Madam:				
The enclosed	l Registered Agent/Registered Off	ice Change and fo	ee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to the fo	ollowing:		
Stuart L R	aney				
45.000	Name of Person		_		
Infrared B	uilding Diagnostics, LLC				
	Firm/Company		_		
PO Box 70	00				
	Address		_		
Lady Lake	, FI 32158-0700				
	City/State and Zip Code		_		
sraney@ib	odic.com				
E-mail	address: (to be used for future ann	ual report notific	ation)		
For further in	nformation concerning this matter,	please call:			
Stuart Ran	ney	859	771-8477		
	Name of Person	ur (	Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	Regi Divi P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:					
<b>2</b> \$2	25 Filing Fee	□ \$55	Filing Fee & Certified Copy		
INHS18 (2/14	)				

## 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: Infrared B	uilding Diagnos	tics, LLC
2. (a	8543 US Highway 441	(b) PC	) Box 700
(	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Leesburg, FL 34788	Lac	dy Lake, FL 32158-0700
	September 19, 2012	L120	000120042
3.	Date of filing/registration in Florida	4.	Document number
5. (	a) Stuart L Raney		
J. (	Registered Agent and Registered Office shown on the record	is of the Florida Dept.	of State:
	609 Highway 466 Lot 247-1530		
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)	<del></del>
	Lady Lake	<sub>-,</sub> 32159	<del></del>
		, FL 02 109	<del></del>
A	b) E F Miller, Jr.		
(,	Enter name of NEW Registered Agent and/or NEW Registered Office address:		7-2
	8543 US Highway 441		
	NEW Registered Office Address:		
	Leesburg	, <sub>FL</sub> 34788	
the cagen was/the a	e limited liability company is not organized under the change or changes are made, the Florida street address it will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member articles of organization or the operating agreement of a member or authorized representative of a member are by accept the appointment as registered agent and	ss of the registered liability comparers of the limited liability from Stuart L	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.  Raney  Printed or typed name of signee
prov the o to m notif	reby accept the appointment as registered agent and sissions of all statutes relative to the proper and compobligations of my position as registered agent as provered reflect a change in the registered office addressive writing of the change.	olese performance of vided for in Chapt s, I hereby confirm	of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed n that the limited liability company has been

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