## L12000/33454

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## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJE	SPEC Contractor Services,	LLC		
		ne of Limite	d Liability Company	
Dear Si	r or Madam:			
The end	closed Registered Agent/Registered Of	fice Change	and fee(s) are submitted for f	iling.
Please 1	return all correspondence concerning th	nis matter to	the following:	
Grego	ory P. Bruce			
	Name of Person			
SPEC	Contractor Services, LLC			
	Firm/Company			
P.O. E	Box 2249			
	Address		<del></del>	
Winte	r Park, FL 32790			1AC 20
	City/State and Zip Code		<del></del>	2015 MOV 18 SECRETARY ALLAHASSE
greg@	@speccontractorservices.com			N 18 A
E	-mail address: (to be used for future an	nual report r	notification)	
For fur	ther information concerning this matter	, please call	:	
Grego	ory P. Bruce	407	538-5954	0A
	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	g amount:		
	<b>2</b> \$25 Filing Fee		3 \$55 Filing Fee & Certified	Сору

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. N	ame of the limited liability company: SPEC Contra	ctor Se	ervices, LL	.C	* · · · · · · · · · · · · · · · · · · ·	
2. (a)	Gregory P. Bruce	(t	<i>)</i>			
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	N		of limited liabil BE POST OFF	
	1000 Chichester St.		P.O. Box	x 2249		
	Orlando, FL 32803		Winter F	ark, FL 32	2790	
	September 27, 2015		L1200012	23656		
3.	Date of filing/registration in Florida	4.		Document n	number	· · · · · · · · · · · · · · · · · · ·
5. (a)	Gregory P. Bruce					
<i>5.</i> (u	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- ):		
	Gregory P. Bruce					
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	4288 Kendrick Rd				75 25 25 25 25 25 25 25 25 25 25 25 25 25	
	Orlando , FL	32804		•	2015 NOV TE SECRETARY ALLAHASSI	77)
(b)	Gregory P. Bruce					The state of the s
(6)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	-		
	Gregory P. Bruce				OF STATE E. FLORIDA	0
	NEW Registered Office Address:			•	€ ا	
	1000 Chichester St.	<del> </del>	•			
	Orlando , FL	32803				
the ch agent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia tere authorized by an affirmative vote of the members of cicles of organization or the operating agreement of the water of a member or authorized representative of a member are the appointment as registered agent and agraions of all statutes relative to the proper and complete ligations of my position as registered agent as provided the proper and complete ligations of my position as registered office address, I have a change in the registered office address, I have a change in the registered office address, I have a change in the registered of the proper and complete ligations of my position as registered of the proper address, I have a change in the registered of the proper address, I have a change in the registered of the proper address, I have a change in the registered of the proper address, I have a change in the registered of the proper address, I have a change in the registered of the proper and complete light and the proper address.	the registability confirmation of the limited l	stered office ompany, it is nited liability liability com	e and the busis hereby configured on the pany.  Government of the pany of the pany.  Finited or type	iness office of firmed that the ras otherwise P. BRUC ed name of signed	of the registered the change(s) the provided in
notifie Signatur	ure of Registered Agent	Ź			, <b>.</b> .	•