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COVER LETTER

TO: Registration Section Division of Corporations	÷	
SUBJECT: D. SAlASINO CONSTRUCT Name of Limited Lia	ion LLC bility 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 fo	ollowing:	
David Saladivo Name of Person	_	
D. SALADINO CONSTRUCTION Firm/Company	ow, LLC	
218 High Point DR. Address	_	
Verice, FL 34292 City/State and Zip Code	_	
d. SA/A JIND CONSTINCTION (Be-mail address: (to be used for future annual report notific	29 mail. Com	
For further information concerning this matter, please call:		
	441-5674	
Name of Person	Area Code & Daytime Telephone Number	
Mailing Address:	Street Address:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		

□ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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: D. SA/Adiwo Construction, LLC
2. (a) D. Salative Construction, LLC Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 2/8 High Point DR. Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Venice, FL 34292 12/05/2013
3. Date of filing/registration in Florida 4. Document number 5. (a) NTB Services L.C. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1872 Tani Ami Trail South Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Suite Services FL 34293 On the proof of the Florida Dept. of State:
Venice - 1 34293
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all reduces relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position of registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely effect a chapte in the registered office address, I hereby confirm that the limited liability company has been notified at writing of his change. Squature of Registered Agent