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## **COVER LETTER**

TO: Registration Section Division of Corporations	e e e e e e e e e e e e e e e e e e e								
SUBJECT: Pinellas Point Contracting, 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:									
Alexander Kolosov Name of Person									
Pinellas Point Contracting, LCC Firm/Company									
6822 22d Ave N. #104	<u>/</u>								
St. Petersburg FL 33710 City/State and Zip Code									
Pinelas point Contacting a smil-com E-mail address: (to be used for future annual report notification)									
For further information concerning this matter, please call:									
Dana Kolosov at (at (	727 )5(03-6122 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:									
\$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.	Na	me of the limited liability company: Pine las 7	Point	Contrac	ting LLC		
2. (	a) .	(0822 22nd Ave N #104	(b) _	6822	22 ad Ave	N	#104
,	, -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	.,-		ling address of limited li	_	
		St. Petersburg, FL 33710			· · · · · · · · · · · · · · · · · · ·	33-	
		2110103300	_	<u> </u>	43/1/	<u> </u>	<u> </u>
		2-20-15		L150	00003554	1	
3.		Date of filing/registration in Florida	4.	Do	ocument number		
5.	(a)	Alexander Kolosov					
		Registered Agent and Registered Office shown on the records of the	Florida D	ept. of State:			
		_2055 Pinellas Point Dr.S.	h n egg:	- —			
		Registered Office Address (MUST BE FLORIDA STREET ADI	OKESS)				
			<u> </u>				
		<u>St. Peterburg</u> , FL	337	10	Eg:	·	
(	b)					5 00	force is
(	U)	Enter name of NEW Registered Agent and/or NEW Registered Off	fice addre	<u>ess</u> :	AS	72	e-restrate e-restrate
					SEC.	20A	
		NEW Registered Cance Address:	-			AM 9:	£ .1:3
		10822 22nd Ave N #10	)L.J		OR IE	=	
			' '	<del></del>	Þ		
		St. Petersburg , FL.	337	10			
1641	1:		aftha C	tota of Floris	da it ia hamahy aanfi	immod ti	hat after
the	cha	imited liability company is not organized under the laws on the organized ander the laws of the florida street address of the	e registe	ered office ar	nd the business office	ce of th	e registered
was	/we	will be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of the second seco	he limite	ed liability c	ompany or as other		
the	afti 	icles of organization or the operating agreement of the lin	nited lia	bility compa	any.		
Si	gnat	ture of a member or authorized representative of a member		V(U)	rinted or typed name of s	signee	
I he	erel viși	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete pe	to act in rforman	n this capaci ice of my du	ity. I further agree i	o comp ar with	ly with the and accept
the to n not	obl sere fied	ions of all statutes relative to the proper and complete per ligations of my position as registered agent as provided fo ely reflect a change in the registered office address, I her d in writing of this change.	or in Ch reby con	apter 603, F firm that the	e.s. Or, if this documents limited liability con	ment is mpany	peing filed has been

Signature of Registered Agent

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