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COVER LETTER

Registration Section
Division of Corporations

TO:

Name	E ENGINEERING LLC of Limited Liability Company
Dear Sir or Madam:	•
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
STANLEY J. MLE Name of Person	czko
NVLINE ENGINE Firm/Company	EERING LLC
11591 DOGWOOD L Address	ANE
Font MyEns BEACL City/State and Zip Code	4, FC 33931
MLECZKO CARES E-mail address: (to be used for future annu	@ AOL, COM al report notification)
For further information concerning this matter, p	please call:
STAN MLECZKO Name of Person	at (239) 206 - 1085 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 a	mount:
\$25 Filing Fee	□ \$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.

l. Na	me of the limited liability company: NULINE ENGINEERING LLC
2. (a)	
	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	(1591 DOGWOOD LANE
	FONT MYELS BEACH 33931 FL
	OCTOBER 21 2016 L16000194675 Date of filing/registration in Florida 4. Document number
3.	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	908 LIVENSCAPE ST.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	BRADENTON, FL 34206
	,FL
	STANLEY J. MLECZKO
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	11591 DOGWOOD LANE
	NEW Registered Office Address:
	FOIT MYEN BEACH, FL 3393/
If the li	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
agent w	nge or changes are made, the Florida street address of the registered office and the business office of the registered rill be identical. Or in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/we the arti	re authorized by an affirmative vere of the members of the limited liability company or as otherwise provided in cless of organization or the operating agreement of the limited liability company.
	STANLEY J. MLECZICO
_	
provision the oblication of th	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the constant of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept against of my position are registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect of change in the registered office address. I hereby confirm that the limited liability company has been in writing of this change.
	e of Registered Agent

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

INHS18 (2/14)