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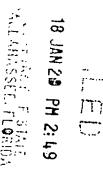
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Y SULKER

COVER LETTER

Division of Corporations	
SUBJECT: COAST CONSTRUCTION S Name of Line	2 CLEANING SERVICES L.L.
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
JOSE R. ALMEIDA Name of Person	
Coast construction & Clean	ING Services LLC.
5650 NW 74th Place APT JOY Address	4
COCONUT CKECK, PL. 330 City/State and Zip Code	73_
TRA Coast Construction and E-mail address: (to be used for future annual report	leaning con
For further information concerning this matter, please c	all:
Spose R. Almeida at Consumer of Person	154) 756 0432 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section
Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	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

LIC

Florida.	
1. Name of the limited liability company: COCS+ CONST	RUCTION and Cleaning Sevices
2. (a) 5650 NW 744 Place 1914 104 (1) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
ECCONUT CREEK, FL. 330+3	coconut creek FL 33073
OCTOBER 23, 2017 Date of filing/registration in Florida 4.	L 17000218504 Document number
5. (a) JOSE R. ALMEIDA	
Registered Agent and Registered Office shown on the records of the Florida 5650 NW 74H1 Place Ak Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	4 104
EXONUT CREEK FL 33	073
(b) JOZELIA D. Oliveira	
Enter name of NEW Registered Agent and/or NEW Registered Office ad 5650 NW 74 H1 Place API 104 NEW Registered Office Address:	
exconut cheek , FL 33	073
If the limited liability company is not organized under the laws of the the change or changes are made, the Florida street address of the regingent will be identical. Or, in the case of a Florida limited liability cowas/were authorized by an affirmative vote of the members of the limited articles of organization or the operating agreement of the limited	stered office and the business office of the registered of the registered of the change (s) in the change (s) it is hereby confirmed that the change (s) it is liability company or as otherwise provided in 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 according to a consistency of all statutes relative to the proper and complete perform the obligations of my position as registered agent as provided for in the merely reflect a change in the registered office address, I hereby constitution of this change.	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed out that the limited liability company has been
Signature of Registered Agent	

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