

L1900000 9736

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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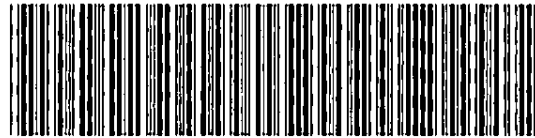
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y. SILKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AB CONCRETE CONSTRUCTION,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:

ALBERT HOWARD
Name of Person

AB CONCRETE CONSTRUCTION,LLC
Firm/Company

6014 MELBOURNE AVE
Address

ORLANDO , FLORIDA 32835
City/State and Zip Code

A_CONSTRUCTION47@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YOLANDA TORRES at (407) 222 5752
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 amount:

☒ \$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.

1. Name of the limited liability company: AB CONCRETE CONSTRUCTION,LLC

2. (a) _____ (b) SAME

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

6014 MELBOURNE AVE ORLANDO FL

32835

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

1/5/2019

L19000009736

3. Date of filing/registration in Florida

4. Document number

5. (a) YOLANDA TORRES

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

6014 MELBOURNE AVE

ORLANDO, FL 32835

(b) ALBERT HOWARD

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

6014 MELBOURNE AVE

NEW Registered Office Address:

ORLANDO, FL 32835

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.

Yolanda Torres
Signature of a member or authorized representative of a member

ALBERT HOWARD

Printed or typed name of signer

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 statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Albert Howard
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA