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## **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: A4 CONSTRUCTION SERVICES 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:

TOHANNA PIMENTA

A4 CONSTRUCTION SERVICES LLC Firm/Company

SERVICES, CONTACT O EMAIL. COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

) 319 - 8664 Area Code & Daytime Telephone Number TOHANNA PIMENTA
Name of Person

**Mailing Address:** 

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

**Street Address:** 

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount:

S25 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.

Name of the limited liability company: _AU_CONST	RUCTION SERVICES LLC
2. (a) PARKVIEW CROSSINGS Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 200 PARKVIEW CROSSINGS  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
APT 816, PANAMA CITY BEACH,	APT 816, PANAMA CITY BEACH
FL. 32413	FL, 30413
3. Date of filing/registration in Florida	$\frac{L22000128212}{\text{Document number}}$
5. (a) ANIBAL DASILVA Registered Agent and Registered Office shown on the records of the I	Florida Dept. of State
200 PAR KUIEW CROSSING AP Registered Office Address (MUST BE FLORIDA STREET ADI	
PANAMA CITY BEACH, FL	· ·
,FL	
(b) LOHANNA DE BARROS PINNE Enter name of NEW Registered Agent and/or NEW Registered Off	= EEE ATM
200 PARKUIEW CROSSINGS NEW Registered Office Address:	APT 816
PANAMA CITY BEACH	<del></del>
	32413
If the limited liability company is not organized under the laws of change or changes are made, the Florida street address of the regagent will be identical. Or, in the case of a Florida limited liability was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the limited liability.	istered office and the business office of the registered ty company, it is hereby confirmed that the change(s) c limited liability company or as otherwise provided in
Signature of a member or authorized representative of a member	TOHANNA DE BARROS PIMENTA Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete per the obligations of my position as registered agent as provided for to merely reflect a change in the registered office address, I here notified in writing of this change.	o act in this capacity. I further agree to comply with the formance of my duties, and I am familiar with and accept in Chapter 605, F.S. Or, if this document is being filed

Signature of Registered Agent