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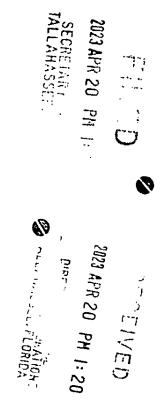
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COVER LETTER

10: Registration Section Division of Corporations			
SUBJECT: VOCKSONVILLE-MAMI CABINGE INSTALL LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fce(s) are submitted for filing.			
Trase return all correspondence concerning this matter to the following:			
MUGNIC VONES Name of Person			
Firm/Company			
7470SC 17th St LOLC			
OCOLO 71341480 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
or further information concerning this matter, please call:			
MRIANIE UONES at (305) Name of Person	787 - 4076 Area Code & Daytime Telephone Number		
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:			
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy		

ANHS18 (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.

· N	ame of the limited liability company: Vachson Ville - Miami capine & Install C
2 (a)	
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	93115c maricam D rol # 1046 9311 Sc maricamp rd # 1046
	OCO10 713/11/72 CCC110 713/4772
	4.17.23 1.23000189674
÷.	Date of filing/registration in Florida 4. Document number
- {a})
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	LDG BNCKSIDE ATC
	VOCKSONVINC .FL37207
(b)	
	ZGZOSE OTHST LAC NEW Registered Office Address:
	0010 FL 34480
h inge agent ' as/w	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the e or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
ייניעור עלעור	ware of a member or authorized representative of a member Printed or typed name of Signee
I here rovis, we obs wer suffe	thy accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address. I hereby confirm that the limited liability company has been d in writing of this change.