## L98000001059

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**EXAMINER** 

## COVER LETTER

TO: Registration Section	
Division of Corporations	$\psi_{ij}$
	<b>4</b> 60
SUBJECT: PREMIER	MODULAR BUILDINGS, L.C.  f Limited Liability Company  Office Change and fee(s) are submitted for filing
	f Limited Liability Company
Name of	Ellinted Elability Company
Dear Sir or Madam:	<b>%</b>
Dem Sil of Maduli.	F.
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
	•
NIII I O	
Nikki Steen Name of Person	<del></del>
name of reison	
Legal Filings, Inc.	
Firm/Company	
16020 Ventura Blud, Suite 4	<del>1</del> 260
16830 Ventura Blvd, Suite #	<del></del>
rudios	
Encino, CA 91436	<del></del>
City/State and Zip Code	
info@inclegal.com E-mail address: (to be used for future annual repor	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this ma	ttor places call
For future information concerning this ma	uci, piease can.
Nikki Steen	at ( 818 ) 380-1940
Name of Person	Area Code & Daytime Telephone Number
CERTIFICATION A DEPEC	MAILING ADDRESS.
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	1, 11221
Enclosed is a check for the follow	ing amount:
7 \$25 Filing Fee	S55 Filing Fee & Certified Conv

## \* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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:PREMI	ER MODULAR BUILDINGS, L.C.		
2. (a) Principal office address of limited liability company:			
(Note: MUST BE STREET ADDRESS)	3505 EAST ROYALTON ROAD#120 BROADVIEW HEIGHTS, OH 44147		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)	155 OFFICE PLAZA DRIVE, SUITE A, TALLAHASSEE, FL 32301		
JULY 14TH, 1998	L9800001059		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
Registered Agent:	DAVID DAUM		
Registered Office Address:	203 E. TAFT-VINELAND ROAD ORLANDO, FL 32824		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent: REGIST	W Registered Office address:  ERED AGENTS LEGAL SERVICES, LICE		
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 OFFICE PLAZA DRIVE, SUITE A,		
MOST BE TECHIDA STREET ADDRESSY	TALLAHASSEE ,FL32301		
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.  Signature of a member or authorized representative of a member			
DAVID CHARBONNEAU Printed or typed name of signee	_		
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 auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, 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.  Signature of Registered Agent			

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