5/7/2018

Division of Corporations



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Division of Corporations

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LLC REGISTERED AGE MULTI-STATE CONSTRUCTION, LLC

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. 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.

	ame of the limited liability company:		ON, LLC
(a)	Principal office address of limited liability company:	(b)	
	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Date of filing/registration in Florida		Document number
(a)			_
(-7	Registered Agent and Registered Office shown on the records of Greg Knotts	of the Florida Dept.	of State:
	Registered Office Address (MUST BF FLORIDA STREET	AEDRESE	
	3155 Rolling Hills Lane		三 選
	Apopka	L 32712 14	
		<u> </u>	
(b)	Enter name of NEW Registered Agent and/or NEW Registers		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registers</u>	d Office address:	の 2 2 3
	C T Corporation System	to est	
	NEW Registered Office Address:	·	
	1200 South Pine Island Road		·
	Plantation, F	L 33324	
Alessa 11	imited liability company is not organized under the la		_ ····
e cha	inge or changes are made, the Florida street address o	of the registered	office and the business office of the registered
as/we	will be identical. Or, in the case of a Florida limited ore authorized by an affirmative vote of the members	of the limited li	ishility company or as otherwise provided in
e arti	cles of organization or the operating agreement of th		
Signat	ture of a member or anthorized representative of a member	Lee A. Dis	Printed or typed name of signee
herel ovisi e obli mere	by accept the appointment as registered agent and as ions of all statules relative to the proper and complet ligations of my position as registered agent as provide ely reflect a change in the registered office address, a d in writing of this change.	gree to act in the te performance of led for in Chapte I hereby confirm	in accounts. I fouther come to comply with the
	orporation System () - A ()	lamas N	И. Halpin
TC	arperation System (Let My 1) 11	Jaille 3 IV	/I. I Iaipiii

Division of Corporations P.O. Box 632 Tallahassee, FL 32314 FILING FEE: \$25:59