

MO4000002235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

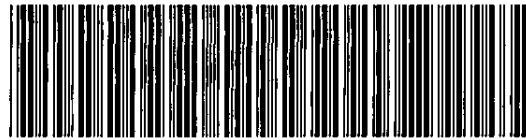
Special Instructions to Filing Officer:

A. LUNT

OCT 25 2011

EXAMINER

Office Use Only



900213490729

10/24/11--01020--024 **25.00

2011 OCT 24 AM 10 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Miller mechanical contractors & Engineers, 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:

Lindsay Winburn
Name of Person

Miller mechanical contractors & Engineers, LLC.
Firm/Company

1976 Airport Ind. Park Drive
Address

Marietta, Ga., 30060
City/State and Zip Code

Lwinburn@mmce.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lindsay Winburn at (770) 952-3864 Ext: 132
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

2011 OCT 24 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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: Miller Mechanical Contractors & Engineers, LLC

2. (a) Principal office address of limited liability company: 1976 Airport Ind. Park Dr.
Marietta, Ga. 30060

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

(b) Mailing address of limited liability company: same as above

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

04/11/2004

3. Date of filing/registration in Florida

MD400000 2235

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Steve Lane

Registered Office Address:

5815 Erhardt Drive
Princeton, FL 33569

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

NEW Registered Agent:

Registered Agents Legal Services, LLC

NEW Registered Office Address:

155 Office Plaza Drive

(**MUST BE FLORIDA STREET ADDRESS**)

Suite A
Tallahassee, FL 32301

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.

Alice M. Miller
Signature of a member or authorized representative of a member

Alice M. Miller / CEO
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 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.

Donna Faires
Signature of Registered Agent

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

FILED
OCT 24 AM 11:00
TALLAHASSEE, FLORIDA