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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
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SECRETARY OF STATE
TALLAHASSEF, FLOORTY
RAIL

Chg.

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: D: g "W" (ontractors Inc. (Name of corporation)
DOCUMENT NUMBER: POYODO 51727
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Robert Weinberg (Name of contact person)
(Firm/Company)
29825 Mulbery Londing (Address) Londing
City/state and zip code)
For further information concerning this matter, please call:
Muli SSG Rosson at (104) 838-4581 (Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Pivision of Corporations 409 E. Gaines Street Tallahassee, FL 32399
officer + Directors At this
CR2E045(6/04) 4++cil

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of che	provisions of sections 60 ange is submitted for a co	orporation orga	mized under the	laws of the Sta	ne of <u>F</u> [·
in orde	er to change its registere	d office or regis	tered agent, or l	ooth, in the Sta	te of Florida.	
1. The name of	the corporation:	Dig W	Contrec	tors I	۸۲	
2. The principal	office address:	21825	MULLY	Loa	:0	
		H	: ll: crod	FL	17.02 C	
3. The mailing a	address (if different):	*		**************************************		
	 	41.			3	
4. Date of incorp	poration/qualification:	12104	Documer	nt number:	POAO	200 2277
	d street address of the cur rtment of State:	rrent registered	agent and registe	ered office on t	file with the	
	Robert	- Leinh	4			· .
	29825	Mulbu	y Los	dia		ECR ECR
	14:11	ccd	FL JOY	<u></u>	HASS	ET AR 프
6. The name and (if changed):	d street address of the new	w registered age	ent (if changed) a	and /or register	ed office	Y OF SI
	Mulissa	Ra	non			7: 21 FATE
	3542g	QU.	sil Ro	cd		_
• '		Box NOT acceptable	e)			
	Ca	llahan	FL J	7011	·	÷
The street addre	ess of its registered office be identical.	e and the street	t address of the	business offic	e of its regist	ered agent,
Such change wa authorized by th	as authorized by resolut ne board, or the corpora	ion duly adopte tion has been n	ed by its board o otified in writin	of directors or g of the chang	by an officer	· so
Signati (Signati	ire of an officer or director)		120	Printed or typed nat	me and tigle)	<u></u>
I hereby accept I further agree to of my duties, an document is bet corporation has	the appointment as reg to comply with the provi d I am familiar with an ng filed merely to reflec s been notified in writing	f istered agent ai isions of all sta d accept the ob it a change in th g of this change			,	performance . Or, if this rm that the
<u> </u>	gnature of Registered Agent)	nom		11/20/	07	
If signing on he	half of an entity:			. ,		

(Typed or Printed Name)