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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: 7.L.CONST.INC  
Name of Corporation

DOCUMENT NUMBER: P05000117173

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:

LENNOX CHARLES  
Name of Contact Person

7.L.CONST.INC  
Firm/Company

1456 NW 192 TERRACE  
Address

MIAMI FL 33169  
City/State and Zip Code

LCHA98@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LENNOX CHARLES at ( 786 ) 285-4319  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: 7-L-CONST INC
2. The principal office address: 1456 NW 192 TERRACE  
MIAMI, FL 33169
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 8/23/2005 Document number: P05000117173
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

LENNON CHARLES  
1456 NW 192 TERRACE  
MIAMI, FL 33169

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

1314 GUILD STREET  
PORT CHARLOTTE, FL 33952  
P.O. Box NOT acceptable

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
Signature of an officer or director

LENNON CHARLES  
Printed or typed name and title

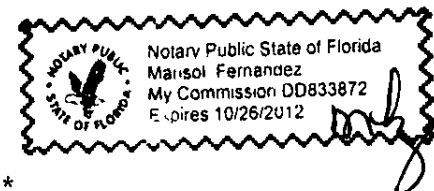
*I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]  
Signature of Registered Agent

06-17-2011  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name



\* \* \* FILING FEE: \$35.00 \* \* \*