

PO6000051143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

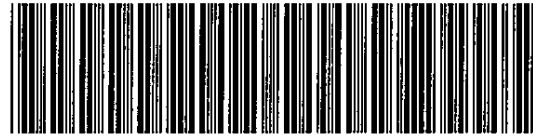
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07/05/06--01012--024 **35.00

T. Roberts JUL 12 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LLS MAGIC CONSTRUCTION, INC.
(Name of Corporation)

DOCUMENT NUMBER: P06000051143

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:

MEYVI LOPEZ
(Name of Contact Person)

565 CASCADING CREEK LANE
(Firm/Company)

WINTER GARDEN, FL 34787
(Address)

321-436-8116
(City/State and Zip Code)

For further information concerning this matter, please call:

MEYVI LOPEZ at (321) 436-8116
(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

565 Cascading Creek Lane
Winter Garden, FL 34787

May 10, 2006

Department of State
Division of Corporations
Corporation Filings
P.O. Box 6327
Tallahassee, FL 32314

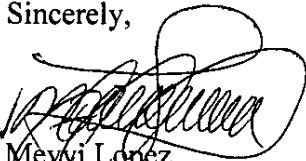
Re: Corporation Change of Address

With this letter I am requesting the change of my business/mailing address of my company LLS MAGIC CONSTRUCTION, INC., Document Number P06000051143, filed April 10, 2006 to read: 565 Cascading Creek Lane, Winter Garden, FL 34787.

This change of address will be for the company and all officers.

Thank you for your assistance in this matter. If you need any more information, please feel free to contact me at the above address.

Sincerely,

A handwritten signature in black ink, appearing to read 'Meyvi Lopez', is written over a circular stamp or seal.

Meyvi Lopez
President

**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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LLS MAGIC CONSTRUCTION, INC.
2. The principal office address: 565 CASCADING CREEK LANE
WINTER GARDEN, FL 34787
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 04/10/2006 Document number: P06000051143
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

MEYVI LOPEZ

1700 W. COLONIAL DR.

OCOOE, FLORIDA 34761

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

MEYVI LOPEZ


565 CASCADING CREEK LANE

(P.O. Box NOT acceptable)

WINTER GARDEN, FL 34787

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 of an officer or director)

MEYVI LOPEZ, PRESIDENT

(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 of Registered Agent)

05/18/2006

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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TALLAHASSEE, FLORIDA