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fA Rocky

TALLAHASSEE, FLORIDA

# 1300ersa UEC. 0 9. 2010

## **COVER LETTER**

SUBJECT: Construction Dynamics Inc. Name of Corporation  DOCUMENT NUMBER: DO 7 0000 9 2 70  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:  Mike Aranda Name of Contact Person  Management Group 1 of Florida Inc. Firm/Company  8695 College Parkway #1193 Address  Fort Myers, FI 33919 City/State and Zip Code  info@mg1fl.com  E-mail address: (to be used for future annual report notification)	
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:  Mike Aranda  Name of Contact Person  Management Group 1 of Florida Inc.  Firm/Company  8695 College Parkway #1193  Address  Fort Myers, Fl 33919  City/State and Zip Code  info@mg1fl.com	
Mike Aranda Name of Contact Person  Management Group 1 of Florida Inc. Firm/Company  8695 College Parkway #1193 Address  Fort Myers, FI 33919 City/State and Zip Code  info@mg1fl.com	··· .
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Management Group 1 of Florida Inc.  Firm/Company  8695 College Parkway #1193  Address  Fort Myers, FI 33919  City/State and Zip Code  info@mg1fl.com	**
Management Group 1 of Florida Inc.  Firm/Company  8695 College Parkway #1193  Address  Fort Myers, FI 33919  City/State and Zip Code  info@mg1fl.com	
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Firm/Company  8695 College Parkway #1193  Address  Fort Myers, FI 33919  City/State and Zip Code  info@mg1fl.com	
8695 College Parkway #1193 Address  Fort Myers, FI 33919 City/State and Zip Code  info@mg1fl.com	,
Fort Myers, FI 33919 City/State and Zip Code info@mg1fl.com	•
Fort Myers, FI 33919 City/State and Zip Code info@mg1fl.com	
City/State and Zip Code info@mg1fl.com	•
City/State and Zip Code info@mg1fl.com	,
info@mg1fl.com  F-mail address: (to be used for future annual report notification)	
F-mail address: (to be used for future annual report notification)	
E man address. (to be used for ratare annual report nonreason)	
For further information concerning this matter, please call:	٠٠.
Mike Aranda at ( 239 ) 267-4804	
Name of Contact Person Area Code & Daytime Telephone Numl	er
Enclosed is a \$35.00 check made payable to the Department of State.	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## 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.	<b>-</b>
1. The name of the corporation: Construction Dynamics Inc.	
2. The principal office address: 8695 College Parkway #1193 Fort Myers, Fl 33919	٠.
	٠
3. The mailing address (if different):	. ;
on the state of th	<u></u>
4. Date of incorporation/qualification: 8/14/2007 Document number: P07000912.7	?O: .
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)	
SPIEGEL & UTRERA, P.A.	ing it excess
1840 SW 22ND ST. 4TH FLOOR	1
MIAMI FL 33145 US	STATE OF THE PARTY
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Goede & Adamczyk PLLC	
8950 Fontana Del Sol Way #100 P.O. Box NOT acceptable	
Naples, Fi 34109	٠,
The street address of its registered office and the street address of the business office of its registered age as changed will be identical.	nt,
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  Mike Aranda - 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 performa of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if I document is being filed merely to reflect a change in the registered office address, I hereby confirm that I corporation has been notified in writing of this change.	nce his he
11-12-10	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Mark Adamczyk Typed or Printed Name	

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