P12000085611

(Requestor's Name)	
(Address)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
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(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 29, 2013

RANDY MCCONNELL CENTRAL FLORIDA SITE DEVELOPMENT, INC. 2202 CURRY FORD RD., SUITE C ORLANDO, FL 32806

SUBJECT: CENTRAL FLORIDA SITE DEVELOPMENT, INC.

Ref. Number: P12000085611

We have received your document for CENTRAL FLORIDA SITE DEVELOPMENT, INC. and check(s) totaling \$25.00. However, your check(s) and document are being returned for the following:

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist II

Letter Number: 013A00018188

RECEIVED
13 AUG 12 PH 12:12

COVER LETTER

Division of Corporations
SUBJECT: Central Florida Site Development, Ir
DOCUMENT NUMBER:
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:
Randy McConnell Name of Contact Person Central Florida Site Development Firm/Company 5313 Patch Road Address
Orlando FZ 32822 City/State and Zip Code
E-mail address: (to be Jused for future annual report notification)
For further information concerning this matter, please call: MWC GIOR at 401, 985-3330 Name of Contact Person at 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

statement of change is su	ns of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu Abmitted for a corporation organized under the laws of the State of <u>F</u> The its registered office or registered agent, or both, in the State of Florid	10810	da	
1. The name of the corpor	- 1212 On (-10 1) 1 61/6/10/10	gar	rent,	INC
2. The principal office ad	idress: 5313 PUTOVI ROOCI EVILLUICI	; 1	<u>U) (</u>	002
3. The mailing address (in	f different):		_	
4. Date of incorporation/o	qualification: Document number:			
5. The name and street ac Florida Department of	ddress of the current registered agent and registered office on file with the State: (If resigned, enter resigned)	ne		
RC	DBERT L. HARDING			•
<u>15</u>	North Eola Drive			
<u>Or</u>	lando, FL 32801		<u>ယ်</u> အ	
The name and stre (if changed);	eet address of the new registered agent (if changed) and /or registered of	fice.	US 12	BACL No.
R	ANDY MCCONNELL	F CO		
53	13 PATCH ROAD		#: 5:7	· protection
OF	P.O. Box NOT acceptable RLANDO, FL 32822	그 [][[*	. 7	
The street address of its as changed will be ident	registered office and the street address of the business office of its regical.	gistered	l agent,	
Such change was author authorized by the board,	ized by resolution duly adopted by its board of directors or by an office, or the corporation has been notified in writing of the change.	er so	\wedge	c n 1
Signature II an offi	M Randy McConv	•	<u> Pre</u>	sident
I hereby accept the appo I further agree to compl performance of my dutie agent. Or, if this docum hereby confirm that the	pintment as registered agent and agree to act in this capacity, with the provisions of all statutes relative to the proper and completes, and I am familiar with and accept the obligation of my position as the seing filed merely to reflect a change in the registered office accorporation has been notified in writing of this change.	e register ldress,	red I	
Signature of Re	egistered Agent S 8 13	<u> </u>	<u>·</u>	
If signing on behalf of a	CONNES			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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