## P96000058190

Diversified Construction & Restoration 12555 S.W. 130th Street Miami, Florida 33186	
(Address)	
,	
(City/State/Zip/Phone #	<del>‡</del> )
PICK-UP WAIT	MAIL
(Business Entity Name	e)
(Document Number)	
Certified Copies Certificates of	of Status
Special Instructions to Filing Officer:	

Office Use Only



900188826489

12/22/10--01009--002 \*\*35.00

2010 DEC 22 AM IO: 11
SECRETARY OF STATE

R.A.

TB

DEC 29 2010

## 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 Fix.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: DI Vees it ed Construction & Restoration, Dr
2. The principal office address: 12555 S.W. 130 Street
Miami, FC 33186
3. The mailing address (if different):
4. Date of incorporation/qualification: 7/11/96 Document number: P96 00058190
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)
Kobertt. Cooke, Esq.
18001 Old Cutter Road Suite 478
Palmetta Barr CC 221111
- TWINEID Day, PC 33196
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
T 11 (5.1) C = 1
J.M. Crown Ch. Jr. Csg.
ARON CURRER Guarch & Shapin, P.A.
255 University Drive
College 6-11: F1 331211
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.
12/17/10
Signature other ordirector Gerardo Quelle 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.
of my duties, and I amfamiliar 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.
12/17/10
Signature of Registron Agent Date
If signing on behalf of an entity:
J.M. Guard Tr. 空間日
If signing on behalf of an entity:  J. M. 6 Jarch JA.  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
CR2F045 (8/05)