A0500000535

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FILED SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

MAY - 1 2008

EXAMINER

COVER LETTER

Registration Section

Division of Corporations

SUBJECT: Ferrera Brothers Development Co., LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A05000000535

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Augustine Ferrera

(Contact Person)

Ferrera Brothers Development Co., LLLP

(Firm/Company)

6601 Lyons Road, Suite C - 1

(Address)

Coconut Creek, Florida 33073

(City, State and Zip Code)

For further information concerning this matter, please call:

Augustine Ferrera

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

INHS04 (01/06)

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

* '	others Development		
Na	ame of Limited Partnership or Li	mited Liability Limited Partnership	
_{2.} 3/15/2005		_{3.} A0500000535	
	g/registration in Florida	Florida document number	
4. The name of the re Department of State:	egistered agent and the registered	office address as shown on the records of the Flori	da
	Jesse D. Sasser		
	Na	me	
	6601 Lyons Road,	Suite C - 1	
	Add	ress	6 . P
	Coconut Creek, Flo	orida 33073	86
	City, Stat	e and Zip	PR
5. The name and Flo	rida street address of the new reg	istered agent and/or office:	08 APR 30 PH 2: 47
	Augustine Ferrera		P
	Na	me	·;
	6601 Lyons Road,	Suite C - 1	5
	Florida street address (P	O. Box not acceptable)	'
	Coconut Creek	_{FL} 33073	
	City, Stat	e and Zip	
6. Such change(s) is/	are effective when filed by the F	lorida Department of State.	
Mani	me Hore		
Signature of General	Partner		
comply with the provand I am familiar with the complete with the provance with the p	isions of all statutes relative to the han accept the obligations of my leading the Agent	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, position as registered agent.	
Filing Fee: Certified Copy (\$35.00 optional): \$52.50		