-L0600060346

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name) .					
(Document Number) ***					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Δ .					

A. LUNT

JUL -1 2009

EXAMINER

Office Use Only



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06/19/09--01028--015 **25.00

SECRETARY OF STATE TALLAHASSEF, FI DRID.

FILED



June 22, 2009

MANUEL VADILLO 11402 NW 41ST STREET SUITE 202 MIAMI, FL 33178

SUBJECT: 103 COMMERCE PARK LLC

Ref. Number: L06000060346

We have received your document for 103 COMMERCE PARK LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6094.

Letter Number: 009A00021178

Agnes Lunt Regulatory Specialist II

Division of Corporations P.O. ROY 6327 Tollahassaa Florida 32314

FILED

COVER LETTER

TO: Registration S Division of C							
SUBJECT:			merce P				
	Name of	f Limited	Liability (Company			
Dear Sir or Madam:							
The enclosed Registe	ered Agent/Registered	Office C	Change and	l fee(s) are	submitted fo	r filing.	
Please return all corre	espondence concernin	ng this ma	atter to the	following:	;		
	Manual Vadilla					4	
Manuel Vadillo Name of Person					₽Ş	nn7	
	Traine of Ferson						OC NOC 5907
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Tor	res and Vadillo LLP					AR	يو
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<u>11402 N</u>	IW 41st Street suite	202				꼺	AM II: Ub
Address					>	Q	
1	Miami, FL 33178						
- · · · · · · · · · · · · · · · · · · ·	ty/State and Zip Code						
	ty/Diate and Exp code						
	. •						
mjvadil	lo@torresvadillollp.c	com	<u>n)</u>				
L-man address. (to be	used for future annual repor	inomicano	·· <i>)</i>				
For further information	on concerning this ma	itter, plea	se call:				
		, [
Julio	Arriaga	at (305)		798 3966		
Name o	f Person		Area	Code & Dayti	ime Telephone N	umber	
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	URIER ADDRESS:			NG ADDR			
Registration So Division of Co				ation Section n of Corpora			
Clifton Buildir					anons		
	Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314						
Tallahassee, Fl			i alialla	55CC, 110HU	a J2J14		
rananassee, Fr	orida J2J01						
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\$55 Filing Fee & Certified Copy

\$25 Filing Fee

STATEMENT OF CHANGE OF REGISTERED OF OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	103 Commerce Park LLC					
2. (a) Principal office address of limited liability compan	y: 62 Indian Trace					
(Note: MUST BE STREET ADDRESS)	suite 154 Weston, FL 33326					
(b) Mailing address of limited liability company:						
(Note: MAY BE POST OFFICE BOX)	TALL TALL					
06/13/06	L06000060336					
3. Date of filing/registration in Florida	4. Document number					
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept of State:					
Registered Agent:	Eugene Howard					
Registered Office Address:	1111 Lincoln Road #500 Miami Beach, FL 33313					
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	Manuel Vadillo , Esg.					
NEW Registered Office Address:	11402 NW 41st Street suite 202					
(MUST BE FLORIDA STREET ADDRESS)	Miami, FL 33178,FL					
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a without or authorized representative of a member						
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, F.S., Or, if this document is being filed to me address, I hereby confirm that the limited liability compared	agree to act in this capacity. I further agree to oper and complete performance of my duties, oxition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.					
Name VVIII						

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00