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(R	equestor's Name)					
(Address)						
(A	ddress)					
(C	ity/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates of	Status				
Special Instructions to Filing Officer:						

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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Manicini Development 11-01, LLC Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Mark Jacob Name of Person Mancin; EnterPrises Firm/Company					
38000 Van Dezke Suite 100 Address					
STEZLING HEIGHTS MI 48312 City/State and Zip Code					
E-mail address: (to be used for future annual repo	ort notification)				
For further information concerning this matter, please	call:				
Mark Ince b at (at (386) スタローコレロム とx + 105 Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
□ \$25 Filing Fee	\$ \$55 Filing Fee & Certified Copy				

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1 100 100			i		
I. Na	une of the limited liability company: Mancin i	uul.	opment 1	601, LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		:	O R. MUNCIN: Di Mailing address of limited (Note: MAY BE POST C. Heights, M	liability company: OFFICE BOX)
	Durfield Beach, FL 33447	_ _			1 433/4
_	04/10/2007		1.0700	00038903	
3:	Date of filing/registration in Florida	4.		Document number	
5 (a)	DONKL MANCINI				
· (u)	Registered Agent and Registered Office shown on the records of	the Flor	rida Dept, of State	- e:	
	_				
	Registered Office Address (MUST BE FLORIDA STREET)	40096	zeei	-	
	Registered Office Address [SIOST BE FLORIDA STREET 2	1DDKE	<u>)</u>		- <u>-</u> -3
				_	_
	DEER FRELD BUICH .FL	334	142	-	:
(b)	RICHARD MANCINI			-	-0 54
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	<u>address</u> :		ತ್ತು
	. /				·
	420 LINCOLN Rd. Suife 408			_	• 0
	NEW Registered Office Address:				
				-	
	MIGHI BEACH .FL	<u>.33/</u>	3 <u>9</u>	-	
16.1 1	to the 190 190.		t		(7
	imited liability company is not organized under the lavinge or changes are made, the Florida street address of				
agent v	vill be identical. Or, in the case of a Florida limited lia	ability	company, it is	s hereby confirmed th	at the change(s)
	ere authorized by an affirmative vote of the members of				wise provided in
the arti	cles of organization or the operating agreement of the				
		_	STEVEN	Printed or typed name of	
Signal	ure of a member or authorized representative of a member			Printed or typed name of	signee
provisi the obl to mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address. It is moriting of this change.	ee to c perfor d for it hereby	uct in this cap rmance of my n Chapter 603 confirm that	acity. I further agree duties, and I am famil 5, F.S. Or, if this docu the limited liability co	to comply with the lar with and accept ment is being filed ompany has been
Signatu	re of Registered Agent				