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C. LEWIS NOV 2 9 2011 **EXAMINER**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	SOUTH HARBOR PROPERTIES,LLC				
	Name of Limited Liability Company				
Dear Sir or Mada	m:				
The enclosed Reg	istered Agent/Registered	Office (Change and fee	e(s) are submitted for filing.	
Please return all c	orrespondence concerning	g this m	atter to the foll	owing:	
	Kay Valletta				
	Name of Person				
	Firm/Company				
	PO Box 2388				
	Address	·	 ,		
	Granite Bay CA 95746 City/State and Zip Code		<u></u>		
ka	vreoexpert@gmail.com	1			
	syreoexpert@gmail.com o be used for future annual report				
For further inform	ation concerning this mat	ter, plea	ise call:		
	ay Valletta	at (916)	705-7551	
Nau	ie of t cison		Area Coue	e & Daytime Telephone Number	
	COURIER ADDRESS:		MAILING ADDRESS:		
Registration		Registration Section			
	Corporations	Division of Corporations			
Clifton Bui		P.O. Box 6327			
2661 Execu	tive Center Circle	Tallahassee, Florida 32314			
Tallahassee	, Florida 32301				
Enclosed i	is a check for the followi	ng amo	unt:		
✓ \$25 Fili	ng Fee		\$55 Filing	Fee & Certified Copy	

- STATEMENT OF CHANGE OF REGISTERED 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:SOUT	H HARBOR PROPERTIES LLC			
2. (a) Principal office address of limited liability compan	930 CAMBRIDGE			
(Note: MUST BE STREET ADDRESS)	BERKLEY MI 48072			
(b) Mailing address of limited liability company:	PO BOX 2388 GRANITE BAY CA 95746			
(Note: MAY BE POST OFFICE BOX)				
10/01/2004	M04000004138 20			
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. Destate:				
Registered Agent:	A1A REFISTERED AGENT			
Registered Office Address:	5647 110TH AVE NORTH ROYAL PALM BEACH FL 33411			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address: MARCY HOCKING			
NEW Registered Office Address:	1265 PLAZA CIRCLE			
(MUST BE FLORIDA STREET ADDRESS)	SINGER ISLAND ,FL 33404			
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 member or authorized representative of a member				
Ray Valletta Printed or typed name of signce	_			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.			
Signature of Registered Agent Physician of Comparations, B.O. Box 62	27 Tallahamas El 22214			
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00				