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(Re	equestor's Name)
(Ad	ldress)
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. (Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
• (Bu	usiness Entity Name)
(Do	ocument Number)
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Special Instructions to	Filing Officer:
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COVER LETTER

TO: Registration Section	
Division of Corporations	110-0 110-0 1110
SUBJECT: Nomoral Name of Limited Partnership or Lim	JILLOGE HOLDINGS JULI
(Name of Limited Partnership of Lim	ited Liability Limited Partnership)
DOCUMENT NUMBER: A06000	000263
The enclosed Statement of Change of Register fee(s) are submitted for filing.	ed Office and/or Registered Agent and
Please return all correspondence concerning th	is matter to:
Ignoció J. Hawley (Contact Person)	O7 0
Ahrmondy Village Holding	S.ULP RASTA
Normandy Village Holding (Firm/Company)	SEE SEE
2601 S. Baychole Pr. Suit	OCT 24 PM 4: N4 CORETARY OF STATE LAHASSEE. FLORID
Miawi, FL 33133 (City, State and Zip Code)	
(City, State and Zip Code)	
For further information concerning this matter	, please call:
Igracio J. Hawley a (Name of Contact Person)	1(305) 854-1900
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the	ne Florida Department of State.
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

INHS04 (01/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301



October 12, 2007

IGNACIO J. HAWLEY VISTOR INTERNATIONAL REALTY 2601 S. BAYSHORE DRIVE, SUITE #1100 MIAMI, FL 33133

SUBJECT: NORMANDY VILLAGE HOLDINGS, LLLP

Ref. Number: A06000000263

We have received your document for NORMANDY VILLAGE HOLDINGS, LLLP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 907A00060269



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.

1. Normandy Village Holdings, LLP
Name of Limited Partnership or Limited Liability Limited Partnership
2. 02108/2006 3. A0600000263
Date of filing/registration in Florida Florida document number
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Jose P. Dominguez Name
800 Beckell Ave Suite + 902. Address
Mani, FL 3331 City, State and Zip ARE 8
5. The name and Florida street address of the new registered agent and/or office: AAA TO COO T. HOWELLEY
Ignacio J. Hawley Fig. 3
Name 2601 S. Bour Shore Dr. Suite+11008 5 Florida street address (P.O. Box not acceptable)
Maui FL 3333 City, State and Zip
6. Such change(s) is/are effective when filed by the Florida Department of State.
Signature of General Partner
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 an accept the obligations of my position as registered agent.
Filing Fee: \$35.00 Certified Copy (optional): \$52.50
Сы шысы Сору (орнонан) фо2оо