

A06000001014

(Requestor's Name)

375 Cypress Way West
Naples, FL 34110

(City/State/Zip/Phone #)

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(Business Entity Name)

A06-1014

(Document Number)

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 27, 2007

CHIANESE FAMILY LIMITED PARTNERSHIP
15825 DELAPLATA LANE
NAPLES, FL 34110

SUBJECT: CHIANESE FAMILY LIMITED PARTNERSHIP
Ref. Number: A06000001014

We have received your document for CHIANESE FAMILY LIMITED PARTNERSHIP 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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 607A00014201

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: CHIANESE family Limited Partnership
(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A06000001014

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:

Scott DASCANI

(Contact Person)

Quantum Advisors Inc

(Firm/Company)

649 fifth Ave South suite 222

(Address)

NAPLES, FL 34102

(City, State and Zip Code)

For further information concerning this matter, please call:

Scott DASCANI

(Name of Contact Person)

at

(239) 877-856-7200

(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.

1. CHIANESE family Limited Partnership
Name of Limited Partnership or Limited Liability Limited Partnership

2. 8-15-2006
Date of filing/registration in Florida

3. A06000001014
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:

Scott DASCANI
Name

1786 TRADE CENTERWAY SUITE 2
Address

NAPLES, FL 34109
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Name

649 fifth AVE South Suite 222
Florida street address (P.O. Box not acceptable)

NAPLES FL 34102
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature] 3-14-07
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 and accept the obligations of my position as registered agent.

[Signature] 3-14-07
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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TALLAHASSEE, FLORIDA

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