## A0800000482

(Re	equestor's Name)	<del>.</del>
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SECRETARY OF STATE
ALLAHASSEF FLORICA

T. HAMPTON

JUN 1 2 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section
Division of Corporations SUBJECT: Division of Corporations Capital Partners C
(Name of Limited Partnership or Limited Liability Bimited Partnership)
DOCUMENT NUMBER: A 08 000000 482
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:
Blayne S. Davis
Blayne S. Davis  (Contact Person)  Nakano Capital Partnus LP  (Firm/Company)  1400 Aufshore Blud North Suite 142  (Address)
1400 Aufshore Blud North Suite 142
(Address)  Naples FL 34102  (City, State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) at (239) 963 - 9112  (Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Florida Department of State.

**MAILING ADDRESS:** 

Registration Section Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

INHS04 (01/06)

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

14.34



RECEIVED

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SECRETATY OF STATE TALLAHASSEE, FLORIDA

June 3, 2008

BLAYNE DAVIS 1400 GULFSHORE BLVD NORTH STE 142 NAPLES, FL 34102

SUBJECT: NAKANO CAPITAL PARTNERS, L.P.

Ref. Number: A08000000482

We have received your document for NAKANO CAPITAL PARTNERS, L.P. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a GENERAL PARTNERSHIP, but your entity is a LIMITED PARTNERSHIP. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 508A00034560

## 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.

change its registered office of registered agent, or both, in the state of riorida.	
1. Nakano Capital Partners CP	
Name of Limited Partnership or Limited Liability Limited Partnership	)
2. Apr. (30 2008 3. A08000000	
Date of filing/registration in Florida Florida documen	t number
4. The name of the registered agent and the registered office address as shown on the red Department of State:	cords of the Florida
Blayple Dours	
1400 GOLC Shore Blod. HothSile	1415
Ma ples, pl 30102 City, State and Zip	
5. The name and Florida street address of the new registered agent and/or office:	
K+1-1 Agents, Inc	OB . SECR
Florida street address (P.O. Box not acceptable)	JUN 11 I RETARY OF LAHASSEE,
1 Mades FL 34103	299 <b>2</b>
City, State and Zip	1 3: LORIA LORIA
$\neg \mid \langle \langle \rangle \rangle$	: 2 <b>2</b>
6. Such change (s) is a deeffective when filed by the Florida Department of State.	- 2
Signature of General Partner	
I hereby accept the appointment as registered agent and agree to act in this capacity. If	
comply with the provisions of all statutes relative to the proper and complete performand and I am familiar with an accept the obligations of my position as registered agent.	ce of my duties,
R&A Agents, Inc.	
in alli-	
Signature of Registered Agent	
Mark J. Price, Assistant Secretary Filing Fee: \$35.00	
timing true.	

Certified Copy (optional): \$52.50