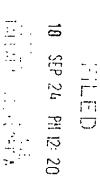
A11000000207

((Requestor's Name)
	(Address)
((Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
•	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	Office Use Only



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COVER LETTER

TO:	Registration Section					
	Division of Corporations					
SUB.	JECT:	ETNA HOL	DING, L	LLP		
	Name of Limited Pa	rtnership or Limit	ed Liability	Limited Partnership		
DOC	UMENT NUMBER:	A1	A11000000207			
	enclosed Statement of Change of are submitted for filing.	f Registered O	ffice and/	or Registered Agent and		
Pleas	e return all correspondence con	cerning this ma	atter to:			
	RODRIGO CUN	IHA				
	Contact Person					
	ETNA HOLDING,	LLLP				
	Firm/Company					
	121 SOUTH ORANGE AV	E, SUITE 850	כ			
	Address					
	ORLANDO, FL 3	2801				
	City, State and Zip C	Code				
	MILENY@MAGICDEVI	ELOPMENT.C	СОМ			
- E	E-mail address: (to be used for future					
For fi	urther information concerning t	his matter, plea	se call:			
	RODRIGO CUNHA	at (407)	9928802		
	Name of Contact Person	Are	a Code and	Daytime Telephone Number		
Enclo	osed is a \$35.00 check made page	yable to the Flo	orida Depa	artment of State.		
STRI	EET ADDRESS:		MAILE	NG ADDRESS:		
	stration Section		_	tion Section		
	ion of Corporations			of Corporations		
Clifton Building P. O. Box 6327						
	Executive Center Circle		Tallahas	see, FL 32314		
Talla	hassee, FL 32301		_			

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.	ETNA HOL	DING, LLI	LP	_
Na	ime of Limited Partnership or Lin	rited Liability I	Limited Partnership	
-	03/14/2011	3	A1100000207	_
Date of filing	g/registration in Florida		Florida document number	
4. The name of the re Department of State:	egistered agent and the registered	office address	as shown on the records of the Floric	la
	ALVAREZ	MILENY		
	Nar	ne		
	121 SOUTH ORANG	SE AVE, SU	JITE 850	
	Addi	ress		
	ORLANDO			
	City, State	and Zip		00 m
5. The name and Flo	rida street address of the new regi	stered agent an	nd/or office:	24 PH 12: 20
	RODRIGO	CUNHA		· p. ·
	Nar	ne	* 3.4	1 2
	121 SOUTH ORANG	E AVE, SU	JITE 850	20
	Florida street address (P.	O. Box not acc	ceptable)	
	ORLANDO	F	L32801	
	City, State	and Zip		
6. Such change(s) is/	are effective when filed by the Fl	orida Departme	ent of State.	
Signature of General	Partner			
comply with the prov and I am familiar wit	inions of all statutes relative to the har accept the obligations of my	e proper and co	in this capacity. I further agree to omplete performance of my duties, gistered agent.	
Signature of Register	ed Agent			
Filing Fee:	\$35.00			

Certified Copy (optional): \$52.50