

A98000001895

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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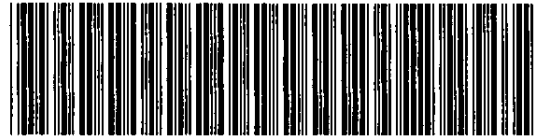
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TAVILLA FAMILY LIMITED PARTNERSHIP  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A98000001895

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:

Spencer Fox

Contact Person

Spencer Fox, P.A.

Firm/Company

201 S. Biscayne Blvd., 17th Floor

Address

Miami, FL 33131

City, State and Zip Code

sf@spencerfoxlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Spencer Fox

at ( 305 )

341-3145

Name of Contact Person

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

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**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. TAVILLA FAMILY LIMITED PARTNERSHIP  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 8/6/1998  
Date of filing/registration in Florida

3. A98000001895  
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:

Spencer Fox  
Name  
201 S. Biscayne Blvd., Ste. 850  
Address  
Miami, FL 33131  
City, State and Zip

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

Spencer Fox  
Name  
201 S. Biscayne Blvd., 17th Floor  
Florida street address (P.O. Box not acceptable)  
Miami FL 33131  
City, State and Zip

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

Claire Tavelle  
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.*

Spencer Fox  
Signature of Registered Agent

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

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