Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6383

Account Name

: FOWLER WHITE BOGGS, P.A. - JACKSONVILLE

Account Number : 120040000146

Phone

: (904)598-3100

Fax Number

: (904)446-2636

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## REGISTERED AGENT CHANGE

ITERA CIS LLC

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## **COVER LETTER**

TO:	Registration Section Division of Corporations	•	
SUBJ	ECT: ITE	ERA CIS, LLC	
		ited Liability Company	
Dear S	Sir or Madam:		
The er	nclosed Registered Agent/Registered Offic	ee Change and fee(s) are submitted for filing.	
Please	return all correspondence concerning this	matter to the following:	
	Deniel B. Nunn, Jr. Attorney Name of Person		
	Fowler White Boggs P.A.	<del></del>	
•	50 N. Laura Street, Suite 2800 Address	<del></del>	
<del></del>	Jacksonville, FL 32202 City/State and Zip Code		
	daniel.nunn@fowlerwhite.com	ation)	
For fu	rther information concerning this matter, p	please call:	
	Daniel B. Nunn, Jr. Attorney at	( 904 ) 598-3118  Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahessee, Florida 32314	
	Enclosed is a check for the following amount:		
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
TNIESTR	(5/0R)		

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. ITERA CIS. LI.C Name of the limited liability company: \_\_ Omrania Middle East Centre 313 (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 28 October Avenue Limassol, CYPRUS CY 3105 ITERA CIS, LLC (b) Mailing address of limited liability company: 9995 Gate Parkwey N., Ste 400 (Note: MAY BE POST OFFICE BOX) Jacksonville, FL 32246 L000000000823 January 21, 2000 4. Document number 3. Date of filing/registration in Florida 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Dennis A. Foster 9995 Gate Parkway N. Registered Office Address: Sulte 400 Jacksonville, FL 32246 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Daniel B. Nunn, Jr. **NEW** Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) 50 N. Laura Street Sulte 2800 Jacksonville If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Eliana Hadjisavva, Director- Itera Management Ltd. Printed or typed name of signee 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 auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, P.S. Or, if this document is being fitted to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change. Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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SECRETARY OF STATE OF CORPORATIONS

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