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TALLAHASSEE FLORINA

D. BRUCE
DEC 27 2012
EXAMINER

## **COVER LETTER**

•	· ·
TO: Registration Section  Division of Corporations	
SUBJECT: A & Rochty Name of Limited Liability	of Naples, LL
rame of Limited Islaude	*
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change a	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	
•	
Alex W. Nicholson — III	- - -
Calls Ut Firm/Company	- C- Wy - A - A - A - A - A - A - A - A - A -
358 Distriction of Address LOU	C AHATA
Mayles FL 34112 City/State and Zip Code	26 PM 5: ASSEE FLOR
E-mail address: (to be used for future annual report notification)	react. netell =
For further information concerning this matter, please call:	
Alex Microbon at (239) Name of Person	rea Code & Daytime Telephone Number
Registration Section Regi Division of Corporations Divis Clifton Building P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 ahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32301

\$25 Filing Fee

Enclosed is a check for the following amount:

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

•
508, Florida Statutes, the undersigned limited ler to change its registered office or registered
Realty of Naples, U
Waples, FL 34112
2580 Wild Pines Lone Maples FL 34112
L 000000 10118  4. Document number
the records of the Florida Dept. of State:
Cook, David Esq.
Banita Spring = 34135-8
EW Registered Office address:
Alex W Nicholson III
2580 Wild Pines Lan
agree to act in this capacity. Folirther agree to roper and complete performance of my duties, osition as registered agent as provided for in the registered of my has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00