#101000021473

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K.SALY EXAMINER JUL 31 2012

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	DBJECT: Pettit Square Partners, LLC Name of Limited Liability Company		
Dear S	Sir or Madam:		
The er	nclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.	
Please	return all correspondence concerning	this matter to the following:	
	The second A Management		
	Thomas A MacIvor Name of Person		
	Summit Management Grou	ρ	
	Firm/Company		
	3530 Kraft Road, Suite 204	<u> </u>	
	Naples, FL 34105	<u> </u>	
	City/State and Zip Code		
——Е	Iprice@summit-management.e-mail address: (to be used for future annual report r	com notification)	
For fu	orther information concerning this matt	er, please call:	
	Thomas A. MacIvor	at (239) 434-6222	
	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
	2661 Executive Center Circle	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301		
	Enclosed is a check for the following	ng amount:	
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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.

1.	Name of the limited liability company:	Pettit Square Partners, LLC
2.	(a) Principal office address of limited liability compar	y: 3530 Kraft Road, Suite 204
	(Note: MUST BE STREET ADDRESS)	Naples, FL 34105
	(b) Mailing address of limited liability company:	3530 Kraft Road, Suite 204
	(Note: MAY BE POST OFFICE BOX)	Naples, FL 34105
	12/12/2001	L01000021473
3.	Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
	Registered Agent:	R&A Agents
	Registered Office Address:	% Stephen E Thompson, Assist Sec. 850 Park Shore Dr, Trianon Ctr, 3rd Flr Naples, FL 34103 US
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
	NEW Registered Agent:	Summit Management Group OF FLORIDA, LLC
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3530 Kraft Road Suite 204 Naples ,FL34105
	the limited liability company is not organized under the infirmed that after the change or changes are made, the lid the business office of the registered agent will be identified by company, it is hereby confirmed that the change (so the members of the limited liability company or as other the operating agreement of the limited liability company or an analysis of a member of authorized representative of a member	
	Alexander A. Pezeshkan	
	nted or typed name of signee	_
I l con an Ch ad	nereby accept the appointment as registered agent and amply with the provisions of all statules relative to the pid I am familiar with and accept the obligations of my pid apter 608, F.S. Or, if this document is being filed to make the company of	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
Sig	nature of Registered Agent	

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