103000031579

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT N	MAIL	
(Business Entity Name)	·····	
(Document Number)		
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N. Culligan DEC 9 7 2009

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 12403 Day 15 Boulevard, L
Dear Sir or Madam.
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alex M. Micholson III Name of Person
At When Firm/Company
2580 MIL FINE LONE
May 165 FL 34113 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alex Microboo at (239) 793-7555 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Division of Corporations Clifton Building Registration Section Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301
Enclosed is a check for the following amount:

□ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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. liability company submits the following statement in ord agent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited ler to change its registered office or registered	
1. Name of the limited liability company: 13403	Davis Baylevard, LL	
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: <u>asbo wild Pines La</u>	
	Naples, FL 34112	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	HIII Harbor Cars C	
08/22/2003	L03000031579	
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:	Look, David Esq.	
Registered Office Address:	BODITO SOCIONET Rd, #	
	3413	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	Alex W Nicholson III	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2580 Wild Pines La	
·	Naples ,FL 34/12	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company.	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of	
	So provided in the artifle of the annualion of	
Signature of a member or authorized representative of a member.	RET. LAHA	
Signature of a member or authorized representative of a member Alexaner Printed or typed name of signee	FILED BEC 26 PM RETARY OF S ANNASSEE, F	
Alexander W Nicholan	FILED BEC 26 PM RETARY OF S ANNASSEE, F	

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