L04000009095

(F	Requestor's Name)			
(<i>F</i>	Address)			
•				
· (A	Address)			
(0	City/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

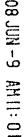
Office Use Only



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SECRETANY OF STATE



San Remo Development, LLC 6705 Red Road Suite 604 Coral Gable, FL 33143

June 12, 2008

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Attn: Teresa Brown

Dear Ms. Brown:

As per our conversation over the phone today attached is the corrected form for San Remo Development, LLC. Please apply check number 1334 dated 06/06/08 previously sent to you with the wrong form to this form. Thank you for calling me today and I'm sorry for any inconvenience this may have caused.

If you have any questions or need additional information please call me.

Halicia

Sincerely,

Laura Galicia

Controller

COVER LETTER

Division of Corp	orations	
SUBJECT:	San Rer	mo Development, LLC
		of Limited Liability Company)
Dear Sir or Madam:		
The enclosed Registered	Agent/Registered (Office Change and fee(s) are submitted for filing.
Please return all correspondent	ondence concerning	this matter to the following:
o	. Ford Gibson	
(N	ame of Person)	
	an Remo Developmen	nt, LLC
(F	irm/Company)	
	8705 Red Road, Suite	604
	(Address)	
	Coral Gables, FL 331 State and Zip Code)	143
(City):	nate and Lip Code)	
For further information	concerning this matt	ter, please call:
Laura Galicia		at (786) 268-2225 Ext. 204
(Name of	Person)	(Area Code & Daytime Telephone Number)
STREET/COUR		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corpo Clifton Building	rations	Division of Corporations P.O. Box 6327
2661 Executive C	enter Circle	Tallahassee, Florida 32314
Tallahassee, Flori		
Enclosed is a ch	eck for the following	ng amount: — Previously sent
☐ \$25 Filing Fe	e	☐ \$55 Filing Fee & Certified Copy

TO: Registration Section

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.

I.	Naı	ne of the limited liability company: San Remo	Development LLC	
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	010	6 0
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6705 Red Road, Suite 604 Coral Gables, FL 33143	C 0
<u>Fe</u>	brua	iry 2, 2004	L04000009095	
3.	Dat	e of filing/registration in Florida	. Document number	,
5.	(a)	Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State.	;
		Registered Agent:	CORPDIRECT AGENTS, INC.	
			515 EAST PARK AVENUE TALLAHASSEE, FL 32301	i j) 1
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered Office address:	
		NEW Registered Agent:	O. Ford Gibson	ı
			6705 Red Road, Suite 604 Coral Gables ■ ,FL 33143	
tha off her lia lin	it afi ice reby bilit nited	imited liability company is not organized under the later the change or changes are made, the Florida street of the registered agent will be identical. Or, in the calconfirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	address of the registered office and the business se of a Florida limited liability company, it is	
-		O. Ford Gibson or typed name of signee)		
I F con am F.S con	nerei mply fan S. C nfirn	by accept the appointment as registered agent and agent with the provisions of all statutes relative to the provision with the provisions of all statutes relative to the provision with and accept the obligations of my position are first locument is being filed to merely reflect a classification with the sample of the provision	ree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, nange in the registered office address, I hereby in writing of this change.	
(Si	gnato	re of Registered Agent)		

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