## U4000011640

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	_
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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· (Do	cument Number)	
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EXAMINER,



## **COVER LETTER**

TO:	Registration Section				
	Division of Corporations				

SUBJECT	Γ:	MR 44 RA LLC						
	Name of Limited Liability Company							
Dear Sir o	r Madam:							
The enclos	sed Registered Agent/Registered	Office (	Change	and	fee(s)	are submitted	for filin	ıg.
Please reti	urn all correspondence concerning	g this m	atter to	the f	ollov	ving:		
	Debra Slifkin							
	Name of Person							
	Marc Roberts Companies	3						
	Firm/Company						c.1	<u>~2</u>
	PO Box 9200							强制
	Address							6- AC
	Jupiter, FL 33468							AM 11: 08
	City/State and Zip Code						13.45 13.45 13.45	: 0
E-mail	debra@marcroberts.com address: (to be used for future annual report	notification	on)				72	œ
For furthe	r information concerning this ma	tter, ple	ase call	l <b>:</b>				
	Debra Slifkin	at (_	561			744-300		
	Name of Person			Area (	Code &	Daytime Telephon	e Number	
Re Di Cli 26	rREET/COURIER ADDRESS: gistration Section vision of Corporations ifton Building 61 Executive Center Circle Ilahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Er	nclosed is a check for the follow	ing amo	ount:					
$\checkmark$	\$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:	MR 44 RA LLC	
2. (a) Principal office address of limited liability company	: 6263 Robinson	n Street
(Note: MUST BE STREET ADDRESS)	Jupiter, FL 33458	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	PO Box 9200 Jupiter, FL 33468-9200	
February 11, 2004	L04000011640	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida Dept.	of State:
Registered Agent:	Angela Rantinella	
Registered Office Address:	6263 Robinson Street Jupiter, FL 33458	
		13
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:	5 17
NEW Registered Agent:	Marc Roberts	9
NEW Registered Office Address:	6263 Robinson Street	
(MUST BE FLORIDA STREET ADDRESS)	Jupiter	FL <u>33458</u>
If the limited liability company is not organized under the longer that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	aws of the State of Florida, it is lorida street address of the registical. Or, in the case of a Florida was/were authorized by an affi	hereby tered office a limited
Printed or typed name of signee	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I fu oper and complete performance sition as registered agent as pro rely reflect a change in the regi whas been notified in writing of	rther agree to of my duties, wided for in stered office this change.
Signature of Reconstered Agent		