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EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Flagler 4100 Property, LLC  
(Name 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 correspondence concerning this matter to the following:

Roberto F. Fleitas, Esq.  
(Name of Person)

Fleitas, Bujan & Fleitas, LLP  
(Firm/Company)

782 NW Le Jeune Road, Suite 530  
(Address)

Miami, FL 33126  
(City/State and Zip Code)

For further information concerning this matter, please call:

Roberto F. Fleitas, Esq. at ( 305 ) 442-1439  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

FLEITAS, BUJAN & FLEITAS, LLP.  
Attorneys at Law

ROBERTO F. FLEITAS, JR., P.A.  
E-MAIL: [RFLEITAS@FLEITASBUJANLAW.COM](mailto:RFLEITAS@FLEITASBUJANLAW.COM)

JESÚS F. BUJAN, P.A.  
E-MAIL: [BUJAN@FLEITAS-BUJAN.COM](mailto:BUJAN@FLEITAS-BUJAN.COM)

ROBERTO F. FLEITAS III, P.A.  
E-MAIL: [RFLEITAS3@FLEITASBUJANLAW.COM](mailto:RFLEITAS3@FLEITASBUJANLAW.COM)

OCEAN BANK BUILDING, SUITE 530  
782 N.W. LE JEUNE ROAD  
MIAMI, FLORIDA 33126

TEL. 1+ 305.442.1439  
FAX. 1+ 305.442.9944

November 6, 2008

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Flagler 4100 Property, LLC  
Document No.: L04000015589

Dear Sirs:

Please be advised that this office represents Flagler 4100 Property, LLC.

Enclosed please find Statement of Change of Registered Agent for Limited Liability Company executed by our client and registered agent. Enclosed also please find check number 1346 in the amount of \$25.00.

If you have any comments, questions or concerns please do not hesitate to contact our office.

Very truly yours,

  
Roberto F. Fleitas III

RFF/ja  
Enc(s)

**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: Flagler 4100 Property, LLC

2. (a) Principal office address of limited liability company: 782 NW Le Jeune Road,  
Suite 3  
Miami, FL 33126

**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 782 NW Le Jeune Road,  
Suite 3  
Miami, FL 33126

**(Note: MAY BE POST OFFICE BOX)**

February 26, 2004 3. Date of filing/registration in Florida L04000015589 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Antonio Pecorelli

Registered Office Address: 782 NW Le Jeune Road, Suite 523  
Miami, FL 33126

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent: Roberto F. Fleitas, Esq.

**NEW** Registered Office Address: 782 NW Le Jeune Road,  
Suite 530  
Miami, FL 33126

**(MUST BE FLORIDA STREET ADDRESS)**

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
(Signature of a member or authorized representative of a member)

Jorge Kasabdj  
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]  
(Signature of Registered Agent)

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

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NOV 10 P 12:04  
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TALLAHASSEE, FLORIDA