

LD4000049196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

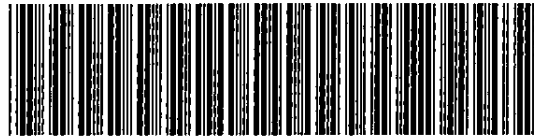
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
2006 JUL 25 PM 12:07



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 22, 2006

MARGOT NICOLET
1934 E. CROWN POINTE BLVD.
NAPLES, FL 34112

SUBJECT: MN SUNCOAST INVESTMENT LLC
Ref. Number: L04000049196

We have received your document for MN SUNCOAST INVESTMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Document Specialist

Letter Number: 806A00035904

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DIVISION OF CORPORATIONS
2006 JUL 25 PM 12: 07

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MN SUNCOAST INVESTMENT 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:

MARGOT NICOLET
(Name of Person)

MN SUNCOAST INVESTMENT LLC
(Firm/Company)

1934 EAST CROWN POINTE BLVD
(Address)

NAPLES FL 34112
(City/State and Zip Code)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 JUL 25 PM 12:07

For further information concerning this matter, please call:

MARGOT NICOLET at (239) 530 0103 / 734 1411 CELL
(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

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. The name of the limited liability company is: MH SUNCOAST INVESTMENT LLC

2. The mailing address of the limited liability company is : 1934 EAST CROWN
POINTE BLVD NAPLES FL 34112

JULY 01 2004
3. Date of filing/registration in Florida

LO 40000.49196
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

GLOBAL EXPANSION CONSULTING LLC
Name

100 SE SECOND STREET SUITE 2610
Address

MIAMI FL 33131
City, State and Zip

6. The name and address of the new registered agent and/or office:

MARGOT NICOLET
Name

1934 EAST CROWN POINTE BLVD
Florida street address (P.O. Box NOT acceptable)

NAPLES FL 34112
City, State and Zip

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)

MARGOT NICOLET
(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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DIVISION OF CORPORATIONS
2006 JUL 25 PM 5:00