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D. BRUCE

OCT 07 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Casa Bella Partners, LLC (Name of Limited Liability Company)			
	•		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	·	
Please return all correspondence concerning	ng this matter to the following:		
Jeffrey A. Grae. (Name of Person)	· <i>f</i>		
(Name of Forson)			
(Firm/Company)			
7450 Avenida Del Ma (Address)	r Suite 2002	SECRETARY OF WILL: 48	
Boca Raton, Florida (City/State and Zip Code)	33433 EFLORIDA	MII:4	
For further information concerning this ma		œ	
Jeffrey A. Graef (Name of Person)	at (56/) 988-923 (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 follow	ving 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.

in the state of Florida.	
1. Name of the limited liability company:	Bella Partners, LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 7450 Avenida Dei Mar Suite 2002 Boca Raton, Florida 33433
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	7450 Avenida Del Mar Suite 2002 Boca Raton, Florida 33433
August 17, 2004  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:	Glazer, Eric L.
Registered Office Address:	2300 Corporate BIRAR & Suite 232 Boca Raton, Florida 33831
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Jeffrey A. Graefi = 0
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	7450 Avenida Def Mar Suite, 2002 Boca Raton ,FL 33433
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member of authorized representative of a member)	laws of the State of Florida, it is hereby confirmed address of the registered office and the business ase of a Florida limited liability company, it is by an affirmative vote of the members of the limited forganization or the operating agreement of the
Jeffrey A. Graef (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 promise familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified (Signature of Registered Agent)	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.

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