UDSOODDAHUR

(Requestor's Name)				
(Address)				
(Ad	ldress)			
·	·			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
ertified Copies Certificates of Status				
Special Instructions to Filing Officer:				
		·		

Office Use Only



000196743810

11/08/11--01027--015 **25.00

FILED

11 NOV -7 PM \$ 55

SECRETARY OF STATE ALLAHASSEE, FLORIDA

D. BRUCE

NOV 0 8 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MPower Property Management 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:
Divina K Westerfield
Name of Person
MPower Property Management LLC Firm/Company
800 N Tamiami Trail Unit 101 SSR
Address
Sarasota FL 34236 City/State and Zip Code
dw@mpowerpropertymanagement.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Divina K Westerfield at (941) 544-3174
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 & 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.

Name of the limited liability company:	MPower Property M	<u>/lanagemer</u>	nt LLC		
2. (a) Principal office address of limited liability of	company: 800 I	800 N Tamiami Trail Unit 101			
(Note: MUST BE STREET ADDRESS)	Sarasota FL 3	Sarasota FL 34236			
(b) Mailing address of limited liability company	y: <u>800 N T</u>	800 N Tamiami Trail Unit 101			
(Note: MAY BE POST OFFICE BOX)	Sarasota, FL 3	34236			
03/03/2005	Lo	L05000022469			
3. Date of filing/registration in Florida	4. Document nur	4. Document number			
5. (a) Registered Agent and Registered Office sho	own on the records of the	-			
Registered Agent:	Divina K West	erfield 🖺	<u> </u>		
Registered Office Address:	5020 Clark Ros	ad #			
	Sarasota FL 34	4233	2 4 [
(b) Enter name of NEW Registered Agent and NEW Registered Agent:	or <u>NEW Registered Of</u> <u>Divina K Weste</u>	25	A S		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES)	800 N Tamiam	B00 N Tamiami Trail Unit 101			
If the limited liability company is not organized unconfirmed that after the change or changes are mad and the business office of the registered agent will liability company, it is hereby confirmed that the clost the members of the limited liability company or or the operating agreement of the limited liability company or or the operating agre	le, the Florida street addresse identical. Or, in the canange(s) was/were author as otherwise provided in ompany.	ess of the regis ase of a Florida ized by an affi the articles of	stered office a limited irmative vote organization		
I hereby accept the appointment as registered ages comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 508, F.S. Or, if this document is being file address. I hereby confirm that the limited liability of Signature of Registered Agent	o the proper and complete of my position as registere id to merely reflect a char company has been notified	e performance ed agent as pro nge in the regi d in writing of	of my duties, vided for in stered office this change.		

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