L05 0000 48757

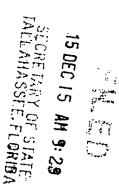
(Req	uestor's Name)				
(Ádd	ress)				
(Add	ress)				
(City	/State/Zip/Phone #)	·			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions to F	iling Officer:				
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DEC 15 2015 J SHIVERS

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE		PUL				
	Name of I	imited Liab	pility Company			
Dear Si	r or Madam:					
The end	closed Registered Agent/Registered Office Ch	ange and fe	e(s) are submitted for filing.			
Please 1	return all correspondence concerning this mat	ter to the fo	llowing:			
Dale 0	G. Hafele					
	Name of Person		•			
North .	American Properties - Southeast, Inc					
	Firm/Company		•			
1412	Jackson Street, Suite 1					
	Address		•			
Fort M	lyers, FL 33901					
	City/State and Zip Code		•			
dale.h	afele@naproperties.com					
E-	mail address: (to be used for future annual re	port notifica	ition)			
For furt	her information concerning this matter, please	e call:				
Dale G	6. Hafele at (239	850-7670			
	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	Regis Divis P.O. 1	LING ADDRESS: tration Section ion of Corporations Box 6327 hassee, Florida 32314			
	Enclosed is a check for the following amount:					
	■ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy			

INHS18 (2/14)

- STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company:	AH,	PUC				·
2.	(a)		_ (b)					
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (5)	1	Mailing address of limit			
		1412 Jackson Street, Suite 1		1412 Jac	ckson Street, Su	ite 1		_
		Fort Myers, FL 33901	- -	Fort Mye	ers, FL 33901			
		5/16/2005	_	LOS	.००० ० ५४७ <u>६</u> ३	3		
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)							
J.	(a)	Registered Agent and Registered Office shown on the records of the R&A Agents, Inc.			- e: -	771		
		Registered Office Address (MUST BE FLORIDA STREET AL			Ã 2 Ω 133 13	5		
		850 Park Shore Drive, Third Floor		_	S CR	9	_	
		Naples _{F7} 3	4103	-		RETAIN AHASSI		Walden
				-	-	NS T	5	e e e e e e e e e e e e e e e e e e e
	ъ)					# <u>\$</u>	>	1 1 1
	`	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice add	ress:	• !	F (S) [جي	strine or
		Dale G. Hafele					2	
		NEW Registered Office Address:						
		1412 Jackson Street, Suite 1			-			
		Fort Myers , FL	3901					
the age was	char nt w /wei	mited liability company is not organized under the laws age or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of the operating agreement of the li	he regist vility cor the limi	ered office npany, it is ted liability	e and the business of s hereby confirmed to y company or as other	ffice of that the	the reg	gistered e(s)
	1	ali Ell / Hilleto		Mie C	5. HAPERE			
		are of a member or authorized representative of a member			Printed or typed name of	_		
pro the to n	visic obli; iere:	y accept the appointment as registered agent and agree ins of all statutes relative to the proper and complete positions of my position as registered agent as provided is reflect a change in the registered office address, I he in writing of this change.	e to act i erforma for in Ci ereby coi	in this capa nce of my a hapter 605, nfirm that t	icity. I further agre duties, and I am fam , F.S. Or, if this doc the limited liability o	ee to con ulliar wi cument compan	nply w th and is bein y has l	ith the accept g filed seen
Sign	aldi	of Registered Agent						

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