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RARD CAS (10.13.14)

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: Marina Lakes	aited Liability Company	
Name of Emitted Erability 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:		
Steve G. V, tale, Esq.		
Name of Person		
Steve F. Vitale	2, P.A.	
Firm/Company		
211 S. Colorado	Ave. Suite 2	
Address 7(1GO1)		
STUATT STIT		
City/State and Zip Code		
5V4/969(a) en a ol. Com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call: Second Concerning this matter, please call:		
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
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

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: Malina Lakes Folt, LCC
11/ BOO 1 22/ 1/ BOO
2. (a) The principal office address of limited liability company: (b) The Complete District Company District Company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
Dellay Reach 1-035476 Dellay Reach FC 334
1/105
3. Date of filing/registration in Florida 4. Document number
Ctorie / 1/1/2
Registered Agent and Registered Office shown on the records of the Florida Dept, of State:
50 SE Olean Blud. Sate 202
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 202
Suite 202 Stratt FL 34997
Ctories (= 1/tdo For
(b) S
2/18. (durado Ave sontes
NEW Registered Office Address:
Suite 2
Stratt 34994
f 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.
Steven G. Vitacl
Signal and the interest of a functive of a member of signee 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 605. F.S. Or, if this document is being filed
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 605, F.S. Or, if this document is being filed to merely deflect of change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
Signature of Registered Agent Stury on Vitale
Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314

FILING FEE: \$25.00