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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

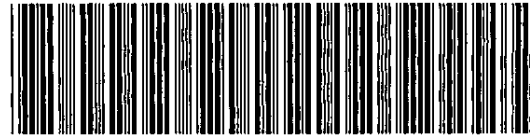
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
12 JUL 23 PM 1:32

JUL 24 2012  
T. HAMPTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CHEALSEA DEVELOPMENT CO. 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:

Mark Haas

Name of Person

Mark Haas CPA

Firm/Company

PO Box 770789

Address

Winter Garden, FL 34777-0789

City/State and Zip Code

m.haas@markhaascpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Haas

Name of Person

at ( 407 )

497-8417

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. Name of the limited liability company: CHEALSEA DEVELOPMENT CO. LLC

2. (a) Principal office address of limited liability company: 11579 CLAYMONT CIRCLE

**(Note: MUST BE STREET ADDRESS)**

KEENES POINT  
ORLANDO, FL 34786

(b) Mailing address of limited liability company: C/O MARK HAAS CPA

**(Note: MAY BE POST OFFICE BOX)**

PO BOX 770789  
WINTER GARDEN, FL 34777-0789

07/15/2005  
3. Date of filing/registration in Florida

L05000069728  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: HAAS, MARK

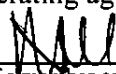
Registered Office Address: 2431 ALOMA AVE  
SUITE 143  
WINTER PARK, FL 32792

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** \_\_\_\_\_


**NEW Registered Office Address:** 213 S DILLARD ST  
**(MUST BE FLORIDA STREET ADDRESS)** SUITE 320F  
WINTER GARDEN, FL 34787

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 of a member or authorized representative of a member

MARK HAAS for PERRY PATEL, MGRM  
Printed or typed name of signer

*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 of Registered Agent

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

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