## L05000087914

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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SECRETARY OF STATE

	OVERLETTER
TO: Registration Section Division of Corporations	ii eggs.
SUBJECT: Aqualea Capital,	LLC
Name of I	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Natalie Gomez	
Name of Person	<del></del>
Aqualea Capital, LLC	
Firm/Company	<del></del>
101 E. Kennedy Blvd #2	110
Address	
Tampa, FL 33602	
City/State and Zip Code	
natalie@njrdevelopmen	
E-mail address: (to be used for future annual report to	noutication)
For further information concerning this matt	er, please call:
Natalie Gomez	at (813 ) 397-2746
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

INHS18 (5/08)

□ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

Enclosed is a check for the following amount:

## 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: Aqualea Capital, LLC	
2. (a) Principal office address of limited liability compa ( <i>Note: MUST BE STREET ADDRESS</i> )	Suite 2110
	Tampa, FL 33602
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	101 E. Kennedy Blvd
	Suite 2110
	Tampa, FL 33602
September 7, 2005	L05000087964
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o Registered Agent:	n the records of the Florida Dept. of State:
Acelistered Argents.	
Registered Office Address:	301 S Gulfview Blvd
	Suite 873
	Clearwater, FL 33767
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	Natalie Goriez
<b>NEW</b> Registered Office Address:	101 E. Kennedy Blvd
(MUST BE FLORIDA STREET ADDRESS)	Suite 2110
	Tampa ,FL 33602
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the changes the members of the limited liability company or as other the operating agreement/of the limited liability company.  Signature of a member or authorized representative of a member  Neil Rauenhorst  Printed or typed name of signee	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an Affirmative vote of
I hereby accept the appointment as registered agent and	lagree to act in this canacity. 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