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EXAMINER

DIVISION OF CORPORATION

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COVER LETTER

TO: Registration Section Division of Corporations	11/4	
SUBJECT: Naples Marina Investments, L.L.C. Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/R	egistered Office Change and fee(s) are submitted for filing.	
Please return all correspondence of	concerning this matter to the following:	
James Larry Nicho	ols, Esquire	
James Larry Nic		
8191 College Park	:way, #205	
Fort Myers, FL City/State and Zip		
jonf@marinaclu E-mail address: (to be used for future a	bsfl.com nnual report notification)	
For further information concerning	g this matter, please call:	
James Larry Nichols Name of Person	at (239) 433-1305 Area Code & Daytime Telephone Number	
STREET/COURIER ADDI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327	
Enclosed is a check for th	e 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.

agent, or born, in the blate by I to that.		
1. Name of the limited liability company: Napl	es Marina Investments, L.L.C.	
2. (a) Principal office address of limited liability compan	y: 1500 Colonial Boulevard, #103	
(Note: MUST BE STREET ADDRESS)	Fort Myers, FL 33907	
(b) Mailing address of limited liability company:	1500 Colonial Boulevard, #103	
(Note: MAY BE POST OFFICE BOX)	Fort Myers, FL 33907	
2/15/06	L06000016652	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	CFRA, LLC	
Registered Office Address:	4221 West Boy Scout Boulevard, #2000 Tampa, FL 33607	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent: <u>NEW Registered Office Address:</u>	W Registered Office address: James Larry Nichols, Esquire 8191 College Parkway, #205	
(MUST BE FLORIDA STREET ADDRESS)	Fort Myers ,FL 33919	
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 of authorized representative of a member Jon Finstrom 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 608. F.S. Or, if this document is being filled 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

INHS18 (05/08)