L06000036891

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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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T. HAMPTON

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EXAMINER

COVER LETTER

FO: Registration Section Division of Corporation						
SUBJECT:		Venpe				
•	Name of I	Limited L	iabil	ity Company		
Dear Sir or Madam:						
The enclosed Registered	Agent/Registered (Office Cha	ınge	and fee(s) are submitted for filing.		
Please return all correspo	ndence concerning	this matte	er to	the following:		
Lin	da Williams			_		
Nar	ne of Person					
NYFL Commo	ercial Holdings 2,	LLC		_		
Fin	n/Company					
	mi Tr., Ste# 16-P	MB 153		-		
	adress		,			
Fort M	yers/FI 33908					
City/Sta	te and Zip Code					
venvp@ E-mail address: (to be used	embargmail.com for future annual report i	notification)		_		
For further information c	oncerning this matt	ter, please	call	:		
Linda Will	iams	at (2	39) 690-2826		
Name of Pers	on	(Area Code & Daytime Telephone Number		
STREET/COURI	ER ADDRESS:		MA	AILING ADDRESS:		
Registration Section			Registration Section			
_	Division of Corporations			Division of Corporations		
Clifton Building	·					
_	Executive Center Circle Tallahassee, Florida 32314					
Tallahassee, Florida	132301					
Enclosed is a che	ck for the followi	ng amoun	ıt:			
\$25 Filing Fee		Г	ן\$5	5 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.

Name of the limited liability company:	Venper III, LLC					
2. (a) Principal office address of limited liability company	State Road 29- Gerber Groves					
(Note: MUST BE STREET ADDRESS)	LaBelle, FL 33975					
(b) Mailing address of limited liability company:	18011 S. Tamiami Tr					
(Note: MAY BE POST OFFICE BOX)	Ste # 16- PMB # 153 Fort Myers, FI 33908					
04/07/2006	L06000036891					
3. Date of filing/registration in Florida	4. Document number					
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida Dept. of State:					
Registered Agent:	Tom Venetis					
Registered Office Address:	10090 Intercom Dr. Unit B13					
	Fort Myers, Fl 33913					
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :						
NEW Registered Agent:	Tim Williams					
NEW Registered Office Address:	10090 Intercom Drive					
(MUST BE FLORIDA STREET ADDRESS)	Unit # B13 Fort Myers ,FL33913					
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 of the members of the limited hability 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 Tom C. Venetis Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agent to comply with the provisions of all statutes relative to the proper and complete performance of my decision, and I am familiar with and accept the obligations of my position as registered agent as provided from 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 Periodered Agent						

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