

L06000059496

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000239232 3)))



H100002392323ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : MOULE AND MOULE, LLP
Account Number : I20100000076
Phone : (321)254-3232
Fax Number : (321)254-1705

FILED
2010 NOV -2 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: rene@moulelaw.com

RECEIVED
10 NOV -2 PM 4:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT CHANGE
CACCIATORE BEACH CONDO, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

A. LUNT
NOV -3 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cacclatore Beach Condo, 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:

Rex E. Moule

Name of Person

Moule & Moule, LLP

Firm/Company

2287 W. Eau Gallie Blvd., Suite B

Address

Melbourne, FL 32935

City/State and Zip Code

kay@moulelaw.com

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

For further information concerning this matter, please call:

Kay G. Stanley

Name of Person

at (321)

254-3232

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

FILED
2010 NOV -2 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Cacciatore Beach Condo, LLC

2. (a) Principal office address of limited liability company: 8 Yacht Club Lane

☐ (Note: MUST BE STREET ADDRESS) Indian Harbour Beach, FL 32937

(b) Mailing address of limited liability company: 8 Yacht Club Lane

☐ (Note: MAY BE POST OFFICE BOX) Indian Harbour Beach, FL 32937

June 9, 2006
3. Date of filing/registration in Florida

L06000059496
4. Document number

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

Registered Agent: Rex E. Moule

Registered Office Address: 440 S. Babcock Street
Melbourne, FL 32901

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

NEW Registered Agent:

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS)

2287 W. Eau Gallie Blvd., Suite B
Melbourne, FL 32935

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]
Signature of a member or authorized representative of a member

Rex E. Moule
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]
Signature of Registered Agent

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