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EXAMINER

COVER LETTER

ŢO:	Registration Section Division of Corporations							
SUBJ	· · · · · · · · · · · · · · · · · · ·			Fund, L				
Dear S	Sir or Madam:							
The e	nclosed Registered Agent/Registered	Office	Change	e and fee(s) are submitt	ed for filir	ıg.	
Please	e return all correspondence concerning	g this m	atter to	the follow	ving:			
	Alfred J. DiNicola, Jr Name of Person							
•	Pinnacle Performance Investmer Firm/Company 8981 Daniels Center Way Suite Address Fort Myers, Florida 33912 City/State and Zip Code	201-E	•			IALLAHASSEE, FLORIDA	10 DEC 30 PH 2: 23	
	Al@thePPGI.com mail address: (to be used for future annual report							
For fu	rther information concerning this mat Alfred J. DiNicola, Jr	ter, plea	ase call	:	454-77	744		
	Name of Person	ar (Area Code &	Daytime Teleph			_
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Reg Div P.O	gistration Section of Co Box 6327 lahassee, Fl	ection rporations			
	Enclosed is a check for the following	ng amo	unt:					
	✓ \$25 Filing Fee		\$5	5 Filing F	ee & Certifie	d 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:	Naples Income Fund, LLC						
2. (a) Principal office address of limited liability compa	any: 23150 Fashion Drive						
(Note: MUST BE STREET ADDRESS)	Suite 231 Estero, FL 33928						
(b) Mailing address of limited liability company:	23150 Fashion Drive						
(Note: MAY BE POST OFFICE BOX)	Suite 231 Estero, FL 33928						
DEC 28, 2010	L06000065562						
3. Date of filing/registration in Florida	4. Document number 6						
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
Registered Agent:	Paul McIntyre						
Registered Office Address:	Suite 231						
•	Estero, FL 33928						
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :							
NEW Registered Agent:	Alfred J. DiNicola, Jr						
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8981 Daniels Center Way Suite 201-E						
(MCST BE TLORIDA STREET ADDRESS)	Fort Myers ,FL33912						
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 change of the members of the limited liability company or as oth or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote terwise provided in the articles of organization						
Alfred J. DiNicola Jr.	<u> </u>						
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my I Chapter 608/F.S. Or, if this document is being filed to had address, I hereby confirm that the limited liability compa	agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in aerely reflect a change in the registered office my has been notified in writing of this change.						

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

Signature of Registered Agent