L06-00015289

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



700110694357

10/17/07--01026--001 **75.00

07 OCT 17 PM 2: 03

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Florida Community New	Markets Fund III, LLC
(Name of Lin	mited Liability Company)
	·
Dear Sir or Madam:	·
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
·	
Innada Estaban Estaban B	
Ignacio Esteban, Executive Director (Name of Person)	
Florida Community Loan Fund, Inc.	
(Firm/Company)	
3107 Edgewater Drive, Suite 2	
(Address)	
Orlegida El 20004	
Orlando, FL 32804 (City/State and Zip Code)	
For further information concerning this matter	place call:
To further mornation concerning this matter	, please can.
Ignacio Esteban, Executive Director	at (407) 246-0846
(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
Enclosed is a check for the 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.

1. The name of the limited	l liability company is	: The Florida Community New I	Markets Fund III, LLC	·
2. The mailing address of	the limited liability of	company is : 3107 Edgewate	r Drive, Suite 2	
Orlando, FL 32804				
July 28, 2006		L0600007528	9 '	
3. Date of filing/registration in Florida		4. Document		
5. The name of the register Florida Department of S	red agent and the reg	istered office address as sho	wn on the records of	the
1	CFRA LLC			
	Corp Center III at In	Name t'l Dr, 4221 W Boy Scout B Address	lvd S	SECRETARY DIVISION OF C
	Tampa, FL 33607-5		-	
•	City	, State and Zip		コ で数:
6. The name and address o	f the new registered	agent and/or office:		
<u> </u>	Florida Community	Loan Fund, Inc.		:
,		Name	3	
<u>.</u>	B107 Edgewater Dri			***
	riorida street addre	ss (P.O. Box NOT acceptab	ie)	
<u>.</u>	Orlando,	FL 32804		
	City,	State and Zip		
confirmed that after the ch and the business office of t liability company, it is her of the members of the lim or the operating agreement	ange or changes are he registered agent veby confirmed that the liability compand of the limited liability.	d under the laws of the State made, the Florida street addivil be identical. Or, in the change(s) was/were authory or as otherwise provided ity company.	ress of the registered case of a Florida limi orized by an affirmati	office ited ive vote
(Signature of a member or authoriz	ed representative of a mem	ber)		
Ignacio Esteban, Executive (Printed or typed name of signee)	Director	·		
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address of hereby confirm to the complete of Redistred Approximation (Signature of Redistred Approximation)	ntment as registered of all statutes relati accept the obligation is document is being that the limited liabi	agent and agree to act in thi ve to the proper and comple ins of my position as register If filed to merely reflect a chi lity company has been notific	is capacity. I further te performance of m red agent as provide inge in the registered ed in writing of this c	agree to y duties, d for in d office change.

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