## 106000103138

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## **COVER LETTER**

TO: Registration Sec Division of Corp		•.	·		
SUBJECT: Lansdow	Lansdowne Street LLC				
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered	Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.		
Please return all corresp	ondence concerning thi	s matter to the f	following:		
Julie Smith					
	Name of Person		_		
Development Associ	iates Of Bonita Spri	ings, Inc			
	Firm/Company		_		
PO Box 366069					
	Address				
Bonita Springs, FL	34136				
City	//State and Zip Code		_		
julie@developmenta	issociates.com				
E-mail address: (to	be used for future annu	ual report notific	cation)		
For further information	concerning this matter,	please call:			
Julie Smith		239	992-9611		
Name o	f Person		Area Code & Daytime Telephone Number		
STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, Flo	oorations Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a cl	eck for the following	amount:			
\$25 Filing Fe	e	<b>□</b> \$55	5 Filing Fee & Certified Copy		
INHS18 (2/14)					

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company:	Street LLC		
2. (a)	24851 South Tamiami Trail	(b)_PO	(b) PO Box 366069	
(**)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Suite 7	Bor	nita Springs, FL 34136	
	Bonita Springs, FL 34134			
	02/27/2014	L060	000103138	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Charles F Maurer, Jr			
J. (L)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:	
	770 Second Avenue South			
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)		
	St Petersburg FI	33701	ILED 5 29 P # 01 FIARY OF STATE	
	, г.	<del></del>		
(b)	Charles F Maurer, Jr			
` ,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	P # 01  E.F.LORIGE	
	4351 Gulf Shore Blvd North		OM -	
	NEW Registered Office Address:		<del></del>	
	Unit 4-N			
	Naples, FL	34103		
the cha agent v was/w	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the	f the registered ability compan of the limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) liability company or as otherwise provided in	
		Charles	F Maurer, Jr	
	ature of a member or authorized representative of a member		Printed or typed name of signee	
provis the ob- to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide selv reflect a change in the registered office address, I do not in writing of this shange.	ree to act in thi performance of d for in Chapto hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed a that the limited liability company has been	
Signati	ire of Registered Agent			

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