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(Re	equestor's Name)
(Ac	ddress)
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(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bı	ısiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	West
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: LANARO PROPERTY I (Name of L		RS, LLC lity Company)	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered C	Office Change	e and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to	o the following:	
LEONARDO LANARO (Name of Person)	- <u>-</u>	_	2
(. mane 01.1 01501)			1800年
(Firm/Company)		· · · · · · · · · · · · · · · · · · ·	(4) (1) (2)
2237 WEST 77TH STREET (Address)			HONOR THE STATE
(Address)		, , , , , , , , , , , , , , , , , , ,	7
HIALEAH, FL 33016		_	
(City/State and Zip Code)			
For further information concerning this matter	er, please ca	li:	
LEONARDO LANARO	at (917) 345 6666	
(Name of Person)		(Area Code & Daytime Telephone)	Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.e	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 illahassee, Florida 32314	
Enclosed is a check for the following	ng amount:		
✓ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy	

INHS18 (8/05)

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.

10/24/2006	L06000103923
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered Florida Department of State:	ed office address as shown on the records of the
LEONARDO LANA	.RO
	ame
450 ALTON ROAD #	2408
	dress
MIAMI BEACH, FL 3	3139
•	tle and Zip
6. The name and address of the new registered agen	t and/or office: and/or office:
LEONARDO LANAF	and/or office: RO me IREET O. Box NOT acceptable)
Nar	ne ne
2237 WEST 77TH ST	TREET SA :
Florida street address (P	'.O. Box NOT acceptable) 景角 宇
HIALEAH F	л. 33016
City, State	
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will liability company, it is hereby confirmed that the choof the members of the limited liability company or or the operating agreement of the limited liability confirmed that the choof the member of a member of authorized representative of a member)	der the laws of the State of Florida, it is hereby e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited lange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization ompany.

(Printed or typed name of signee)

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 standers 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 of Registered Agent)

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