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SECRETARY OF STATE TALLAHASSEE FI ORINA



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Blue Shore Estates, LLC (Name o	f Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Raymond J. Nash (Name of Person) Blue Shores Estates, LLC	NOTE: CHANGE OF BUSINESS ADDRESS FOR THE LLC.
(Firm/Company) 6321 Porter Road, Suite 10 (Address)	
Sarasota, FL 34240 (City/State and Zip Code)	
For further information concerning this ma	•
Hazel Thames (Name of Person)	at (941) 387-3829 (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	ing 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.

. The name of the limited liability company is: Blue Shore Estates, LLC
The mailing address of the limited liability company is: 1401 Brickell Ave #500, Miami, FL 33131.
LEASE CHANGE MAILING ADDRESS TO - 6321 Porter Road, Suite 10, Sarasota, FL 34240
ovember 14, 2006 L06000110208
Date of filing/registration in Florida 4. Document number
The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Marcell Felipe
Name 1401 Brickell Avenue 500 Address Miami, FL 33131 City, State and Zip
City, State and Zip The name and address of the new registered agent and/or office:
Miami, FL 33131 City, State and Zip The name and address of the new registered agent and/or office: Raymond J. Nash Name Raymond J. Nash
6321 Porter Road, Suite 10
Florida street address (P.O. Box NOT acceptable)
Sarasota, FL 34240
City, State and Zip
the limited liability company is not organized under the laws of the State of Florida, it is hereby nfirmed that after the change or changes are made, the Florida street address of the registered office d the business office of the registered agent will be identical. Or, in the case of a Florida limited bility company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote the members of the limited liability company or as otherwise provided in the articles of organization the operating agreement of the limited liability company.
gnature of a member or authorized representative of a member)
aymond J. Nash
thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to act in this capacity. I further agree to mply with the provisions of all statutes relative to the proper and complete performance of my duties, at I am familiar with and accept the obligations of my position as registered agent as provided for in apter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office dress. I hereby confirm that the limited liability company has been notified in writing of this change.

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