## 607000001815

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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: TENTH STREET PROPER (Name of		bility Company)
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Chan	ge and fee(s) are submitted for filing.
Please return all correspondence concernin	g this matter	to the following:
PAUL STEWART JR.		
(Name of Person)		
TENTH STREET PROPERTIES, LLC (Firm/Company)		
6681 DABNEY STREET		
(Address)	<del></del>	<del></del>
FORT MYERS, FL 33966 (City/State and Zip Code)		
For further information concerning this ma	tter, please c	all:
PAUL STEWART JR.	at (239	707-6473
(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	R D P	AAILING ADDRESS: Legistration Section Division of Corporations LO. Box 6327 Fallahassee, Florida 32314
Enclosed is a check for the following	ina amaunt.	

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

## 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 limite	d liability company is:	TENTH STREET PROPER	RTIES, LLC	
2. The mailing address of	the limited liability co	ompany is: 6681 DABNEY S	TREET, FOF	RT MYERS
FL, 33966				
01/05/2007		L07000001815		
3. Date of filing/registration in Florida 4. Document number				
5. The name of the register Florida Department of	State:	stered office address as shown	on the records	s of the
	STEWART, PAUL JI		_	
	1426 SE 44TH STR	Name EET	7.00	
	07 NOV 29 SECRETAR TALLAHASS			
6. The name and address of	- TO			
STEWART, PAUL JR				
	6681 DABNEY STR	Name EET	PM 12: 50 OF STATE EE FLORIDA	
	Florida street address	s (P.O. Box <b>NOT</b> acceptable)		
	FORT MYERS	FL 33966		
	City, S	State and Zip		
confirmed that after the cl and the business office of liability company, it is her of the members of the lin or the operating agreement	nange or changes are me the registered agent we reby confirmed that the nited liability company of the limited liability.	under the laws of the State of I nade, the Florida street address ill be identical. Or, in the case change(s) was/were authorize or as otherwise provided in the y company.	Florida, it is h of the registe of a Florida l d by an affirn e articles of o	ereby red office imited native vote rganization
(Signature of a member or author	zed representative of a memb	er)		
PAUL STEWART JR  (Printed or typed name of signee)		<del></del>		
	ntment as registered a s of all statutes relative d accept the obligation his document is being that the limited liabili	gent and agree to act in this ca e to the proper and complete p is of my position as registered of filed to merely reflect a change ty company has been notified in	ipacity. I furt erformance o agent as prov in the regist n writing of it	her agree to f my duties, ided for in ered office iis change.

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

(Signature of Registered Agent)