## #10700008089

(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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K. SALY EXAMINER JUN 2 2011

## **COVER LETTER**

TO:	Registration Division of	n Section Corporations				
		544.775.846				
SUBJECT: PALAZZO DI ORO PROPERTY COMPANY, LLC.						
		Name of	Limited L	iability Company		
Dear	Sir or Madan	1:				
The e	nclosed Regi	stered Agent/Registered	Office Ch	ange and fee(s) are submitted for filing.		
Pleas	e return all co	orrespondence concerning	g this matt	er to the following:		
		Stephanie Papoulis				
		Name of Person				
	Se	enior Care Group, Inc.	· · · ·			
		Firm/Company				
1240 Marbella Plaza Drive						
		Address				
		Tampa, FL 33619				
		City/State and Zip Code				
H	spapot -mail address: (to	ulis@seniorcaregroup. be used for future annual report	com notification)			
For fu	orther informa	ntion concerning this mat	ter, please	call:		
		anie Papoulis	_ at ( <u> </u>	313_)341-2700		
	Namo	e of Person		Area Code & Daytime Telephone Number		
	STREET/C	OURIER ADDRESS:		MAILING ADDRESS:		
Registration Section			Registration Section			
	Division of (			Division of Corporations		
	Clifton Build			P.O. Box 6327		
		ive Center Circle Florida 32301		Tallahassee, Florida 32314		
	Enclosed is a check for the following amount:					
	\$25 Filin	ig Fee		\$55 Filing Fee & Certified Copy		

TO:

## 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. Name of the limited lightities	Di Oro Property Company III C				
1. Name of the limited liability company: Palazzo					
2. (a) Principal office address of limited liability company	/:				
(Note: MUST BE STREET ADDRESS)	1240 Marbella Plaza Drive Tampa, FL 33619				
(b) Mailing address of limited liability company:	<u> </u>				
(Note: MAY BE POST OFFICE BOX)	1240 Marbella Plaza Drive Tampa, FL 33619				
01/22/2007	L07000008089				
	4 Danis and signature 10° 1				
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State.				
Registered Agent:	National Registered Agents Inc. 2				
Registered Office Address:	P.O. Box 927 West Windsor, NJ 08550-0927				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW</u> Registered Agent:	W Registered Office address:  David R. Vaughan				
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1240 Marbella Plaza Drive Tampa ,FL33619				
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the fimited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  David R. Vaughan	laws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.				
Printed or typed name of signee	<u></u>				
I hereby accept the appointment as fregistered agent and a comply with the provisions of all statutes relative to the providing and I amifamiliar with and accept the obligations of my po Chapter 608, F.S. Or, if this about its being filed to me address! I have by company that the inhitted jubility company Signature of Registered Agent	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.				
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314					

**FILING FEE: \$25.00** 

INHS18 (05/08)