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(Re	equestor's Name)		
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## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	SUBJECT: PORT ST. LUCIE PLAZA III, LLC  Name of Limited Liability Company			
Dear	Sir or Madam:			
The e	nclosed Registered Agent/Registe	ered Office Change and fee(s) are submitted for filing.		
Please	e return all correspondence concer	rning this matter to the following:		
	•			
Todd T. Nepola  Name of Person				
	Name of Person			
Current Capital Management Inc.				
	Firm/Company			
4000 Hollywood Boulevard Suite 685-S				
	1.02.133			
	Hollywood, FL 330 City/State and Zip Code	21		
E	Todd@currentcapitalgro	pup.com report notification)		
For fi	arther information concerning this	s matter, please call:		
	Todd Nepola	at ( 954 ) 966-8181		
	Name of Person	at ( 954 ) 900-8181  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 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.

1. Name of the limited liability company: PO	RT ST. L'UCIE PLAZA III ,LLC		
2. (a) Principal office address of limited liability company:			
(Note: MUST BE STREET ADDRESS)	94-02 150th Street Jamaica, NY 11435		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)	94-02 150th Street  Jamaica, NY 11435		
June 7, 2007	L070000601492 55 m		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Depth of State:			
Registered Agent:	Samual D. Navon, Esq.		
Registered Office Address:	c/o Navon & Lavin, P.A. 2699 Stirling Road., Suite B-100 Fort Lauderdale, FL 33312		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:	Todd Nepola		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4000 Hollywood Boulevard Suite 685-S Hollywood ,FL33021		
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member			
Michael Bellino, Managing Member 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 statutes 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