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M. THOMAS

DEC 2 9 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ		ns Land Acquisitions, LLC lited Liability Company	
Dear S	Sir or Madam:		
The er	nclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.	
Please	return all correspondence concerning thi	s matter to the following:	
	Rita Roig-Madrigal		
PE	Name of Person REECT SEASONS LAND A	couisitions LLC 語 员	
	8335 SW 82nd Terrace Address	couisitions Le	Same Same
	Miami, FI 33143 City/State and Zip Code		
	SaltyFlyMadrig@Aol.com mail address: (to be used for future annual report notified the information concerning this matter,		
	Rita Roig-Madrigal a	t (786) 412-4705 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 a	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.

•	
Name of the limited liability company: Perfect	Seasons Land Acquisitions, LLC
2. (a) Principal office address of limited liability company	y: 2631 SW 152nd Court
_[✓] (Note: MUST BE STREET ADDRESS)	Miami, El.33185
(b) Mailing address of limited liability company:	2631 SW 152nd Court
(Note: MAY BE POST OFFICE BOX)	Miami, Fl 33185
7/20/2007	L07000075098
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Caridad Roque Valdoviños
Registered Office Address:	2631 SW 152nd Court
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address: Too Barrier Rita Roig-Madrigal
NEW Registered Agent:	Rita Roig-Madrigal
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8335 SW 82nd Terrace
	<u>Miami</u> ,FL <u>33143</u>
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 iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Caridad Roque Valdovinos Printed or typed name of signee	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to meaddress, I hereby confirm that the limited liability comparate	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
1 tul as Made &	

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

Signature of Registered Agent X