

108000006107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

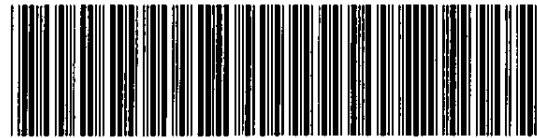
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DIVISION OF CORPORATION
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G. MCLEOD

MAR 17 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TIBURON GROUP, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN PEZZINO
(Name of Person)

TIBURON GROUP, LLC
(Firm/Company)

12870 TRADE WAY FOUR #108 / PMB315
(Address)

BONITA SPRINGS, FL 34135
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN PEZZINO at (239) 591-3246
(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

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

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.

- | | |
|---|---------------------|
| <u>JANUARY 14, 2008</u> | <u>L08000006107</u> |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: | |

City, State and Zip

- City, State and Zip

INHS18 (8/05)

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