L08000043825

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09 APR 10 AMII: 52 SECRETARY OF STATE

J. BRYAN

APR 13 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: NICE DAYTONA LLC (Nam	ne of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	ng this matter to the following:	
RICARDO G. CALVO		
(Name of Person)		
NICE DAYTONA LLC (Firm/Company)	99 APR 10 AM 11: 52 SECRETARY OF STATE FALLAHASSEE. FLORIG	
2154 AUSTIN AVE (Address)	RIO MII: 52 HASSEE, FLORI	
DELTONA / FL 32738	STATE STATE STATE STATE	
(City/State and Zip Code)		
For further information concerning this m	atter, please call:	
RICARDO CALVO	at (386) 532-8210	
(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 follow	wing 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: NICE DA	YTONA LLC		Ð
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany: 2154 Austin Ave DELTONA - FL 32738		1 1
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2154 Austin Ave DELTONA - FL 32738		11 2
May 01, 2008	L08000043825	R 10	-
3. Date of filing/registration in Florida	4. Document number	EE G T	
5. (a) Registered Agent and Registered Office shown	on the records of the Flor	ida Dept. of State; RILL	3
Registered Agent:	FUNCOAST REALTY	rrc Su	
Registered Office Address:	313 S. ATLANTIC AVE		
	Suite A DAYTONA BEACH, F	L 32118	0
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	RICARDO G. CALVO		0
	2154 AUSTIN AVE.		
1112002 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	DELTONA	■,FL <u>32738</u>	
If the limited liability company is not organized under that after the change or changes are made, the Florida's office of the registered agent will be identical. Or, in thereby confirmed that the change(s) was/were authoriz liability company or as otherwise provided in the articl limited liability company. (Signature of a member or authorized representative of a member)	street address of the registor he case of a Florida limite ted by an affirmative vote	ered office and the busine d liability company, it is of the members of the lim	ss ited
RICARDO G. CALVO			
(Printed or typed name of signee)			
I hereby accept the appointment as registered agent as comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability campany has been not	nd agree to act in this cap e proper and complete per tion as registered agent a et a change in the register ified in writing of this cha	acity. I further agree to formance of my duties, ar s provided for in Chapter ed office address, I hereby nge.	ıd I 608, '
(Signature of Registered Agent)			

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