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COVER LETTER		
TO: Registration Section Division of Corporations		
SUBJECT: SERCIO J. VICTO (Name of Limited	I 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:		
SERCIO VIGNALI (Name of Person)		
Femme CAve		
(Firm/Company)		
11300 Lindbergh Blvd. Ste 103, PMB 109		
FORT Myers FL 33913 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
SERGIO VIGNALI at (2	34) 226 0003	
(Name of Person) (A	rea Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amoun	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

\$55 Filing Fee & Certified Copy

☐ \$25 Filing Fee

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:	no J. VIGNALI, M.D, LLC	
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	13100 Westlinks terrace Ste 10 Fort Myers FL 33913	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	11300 Lindhergh BLUD Ste 103 PMB 100 TOUT MYENS FL 33913	
3. Date of filing/registration in Florida	LO 800 00 7 0 2 7 4 4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	SERGIO J. VIGNALIMO	
Registered Office Address:	480 NE 30Th 67. #1401	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : NEW Registered Agent: Service J. Viwnal, Mo		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13100 West Links terme, state tort myers, FL 33913	
If the limited liability company is not organized under the limited after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the call hereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member) (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 propant familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	aws of the State of Florida, it is hereby confirmed taddress of the registered office and the business are of a Florida limited liability company, it is y an affirmative vote of the members of the limited forganization or the operating agreement of the	
confirm that the limited liability company has been notified	in writing of this change.	

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

(Signature of Registered Agent)