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J. SAULSBERRY EXAMINER

MAY 9 2012

## **COVER LETTER**

**Division of Corporations** Bay Area Management, LLC **SUBJECT:** 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: Habibollah Shobeiri Name of Person Firm/Company 11531 Savannah Lakes Dr Address Parrish, Florida 34219 City/State and Zip Code Bayarea\_managment@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Habibollah Shobeiri Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: **√** \$25 Filing Fee \$55 Filing Fee & Certified Copy

INHS18 (5/08)

~ TO:

Registration Section

## 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:	Bay Area Management, LLC
2. (a) Principal office address of limited liability comp	any: 11531 Savannah Lakes Dr
(Note: MUST BE STREET ADDRESS)	Parrish, Florida 34219
(b) Mailing address of limited liability company:	11531 Savannah Lakes Dr
(Note: MAY BE POST OFFICE BOX)	Parrish, Florida 34219
11/17/2008	L080000107078
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of Registered Agent:	on the records of the Florida Dept. of State;  Joseph Naimv
Registered Office Address:	6320 Venture Drive, Suite 104  Lakewood Ranch, Florida 34202
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	NEW Registered Office address: Habibollah Shobeiri
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11531 Savannah Lakes Dr Parrish, Florida 34219
	,FL
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote
Printed or typed name of signee	<del></del>
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any 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