L0900000/028

(Red	questor's Name)
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Doc	cument Numbe	r)
Certified Copies	Certificate	es of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section	;
Division of Corporations	•
SUBJECT: PENARANDA, HC Name of Lin	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
DEXTER S. PENARRIBA Name of Person	
`	
PENARANDA NC LOLF. Firm/Company	ings, LLC
Firm/Company	
5820 HARRORAGE TO	
5820 HARBORAGE DE	
	•
FT. MYEA FL 33908 City/State and Zip Code	
mon son so 1745 @ yakeo E-mail address: (to be used for future annual report notif	fication)
For further information concerning this matter,	
	I
	at (ziy) b
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: 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



June 7, 2012

DEXTER S. PENARANDA 5820 HARBORAGE DRIVE FT. MYERS, FL 33908

SUBJECT: PENARANDA NC HOLDINGS, LLC

Ref. Number: L09000001028

We have received your document for PENARANDA NC HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 312A00016154

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.

agent, or both, in the state of Ptortaa.	
1. Name of the limited liability company: PENDEAN I	DA NC HOLDINGS LLC
2. (a) Principal office address of limited liability company	: 5820 HARBORAGE DR
(Note: MUST BE STREET ADDRESS)	FT, 119 ERS \$1 33908
(b) Mailing address of limited liability company:	3820 HARBORAGE DR
(Note: MAY BE POST OFFICE BOX)	M. 113ERS FL 33908
01/06/2005	10900000 10 38 T
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	9-1
Registered Agent:	CASES, PATRICK OFF TO
Registered Office Address:	9248 BONIFA BEACH RA
	BONITA SPRINGS, FL 34138
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	BEXTER S. PENBRANDA
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5820 HARBORAGE DR
(MUSI BE FLORIDA STREET ADDRESS)	#7 Myter ,FL 33908
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 identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company Lack T. January Signature of a member or authorized representative of a member	lorida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote wise provided in the articles of organization
Printed or typed name of signee	_

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent