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SECRETARY OF STATE

D. BRUCE

MAR 17 2009

EXAMINER

COVER LETTER

INHS18 (5/08)

TO: Registration Section Division of Corporations			
SUBJECT: MARTIATUS ALVAREZ ALC (Name of Lim		ESIGN, LLC ility Company)	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change a	nd fee(s) are submitted for fil	ing.
Please return all correspondence concerning this m	natter to tl	ne following:	
ROLANDO MARTIATUS (Name of Person)			
MARTIATUS ALVAREZ ALONSO DESIGN, LLC (Firm/Company)			
8222 60TH STREET CIR EAST, APT 201			091 TALLA
(Address)			MAR 16 HASSEL
SARASOTA,FL 34243 (City/State and Zip Code)			FILED 9 MAR 16 PH 12: 44 CRETAKY OF STATE AHASSEE, FLORIDA
For further information concerning this matter, ple	ease call:	-	DA +
ROLANDO MARTIATUS at (702) 6350543	
(Name of Person)	(Area Co	ode & Daytime Telephone Nu	mber)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, Florida 32314	·
Enclosed is a check for the following am	ount:		
✓ \$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: MAF	RTIATUS ALVAREZ ALONSO DESIGN, LLC
2. (a) Principal office address of limited liability (Note: MUST BE STREET ADDRESS	company: 8222 60TH STREET CIR EAST, APT 201 SARASOTA,FL 34243
(b) Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX)	ny: 8222 60TH STREET CIR EAST, APT 201 SARASOTA,FL 34243
01/26/2009	L0900007812
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office s	hown on the records of the Florida Dept. of State:
Registered Agent:	ROLANDO MARTIATUS
Registered Office Address:	8202 60TH STREET CIR E, APT 1105 SARASOTA, FL 34243
(b) Enter name of NEW Registered Agent as	nd/or NEW Registered Office address:
NEW Registered Agent:	OF PH M
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRE	ESS) 8222 60TH STREET CIR EAST, FT 201- SARASOTA ,FL 34243
that after the change or changes are made, the Flo office of the registered agent will be identical. O hereby confirmed that the change(s) was/were au	ander the laws of the State of Florida, it is hereby confirmed orida street address of the registered office and the business r, in the case of a Florida limited liability company, it is thorized by an affirmative vote of the members of the limited articles of organization or the operating agreement of the
ROLANDO MARTIATUS (Printed or typed name of signee) I hereby accept the appointment as registered ag comply with the provisions of all statutes relative am familiar with and accept the obligations of my	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, and I position as registered agent as provided for in Chapter 608, reflect a change in the registered office address, I hereby
F.S. Or, if this document is being filed to merely confirm that the limited liability company has been (Signature of Registered Agent)	reflect a change in the registered office address, I hereby in notified in writing of this change.

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