## 10900057974

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
	,					

Office Use Only



700183083647

08/02/10--01040--003 \*\*25.00



S. HAWKES

AUG 3 - 2010

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJI	BJECT: Marcio Jaspan, LLC  Name of Limited Liability Company					
Dear S	ir or Madam:			•		
	closed Registered Agent/Registered	l Office (	Change	and fe	ee(s) are submitted for f	ilina
					•	iiiig.
Please	return all correspondence concerning	ng this m	atter to	the fo	llowing:	
		-			- Novice up	
	MARCIO JASPAN				ı	
	Name of Person					
	MARCIO JASPAN, LLC	;			į.	
•	Firm/Company					,
	447 NODTH 6467 AVENU				Up & Certi	
-	117 NORTH 31ST AVENI	UE	<u> </u>	_	-	
	HOLLYWOOD, FLORIDA 3	3021			ia 32	
	City/State and Zip Code				- N	
E-0	marciojaspan@hotmail.co	om t notificati	on)		1	
-	ther information concerning this ma			):		
	Marcio Jaspan	at (	954		652-9448	
<del> ''</del>	Name of Person	ar (_		Area Co	ode & Daytime Telephone Num	ber
	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	ing am	ount:			<b>~</b>
ſ	<b>√</b> \$25 Filing Fee	g Fee S55		55 Filir	ng 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.

agent, or both, in the State of Florida.				
Name of the limited liability company:	MARCIO JASPAN LLC			
2. (a) Principal office address of limited liability company	y: 4401 POWER LINE ROAD  FT. LAUDERDALE FL 33021 US			
(Note: MUST BE STREET ADDRESS)				
(b) Mailing address of limited liability company:	117 NORTH 31ST AVENUE			
(Note: MAY BE POST OFFICE BOX)	HOLLYWOOD FL 33021			
06/15/2009	L09000057974			
3. Date of filing/registration in Florida	4. Document number			
5. (a). Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:			
Registered Agent:	CORPORATION SERVICE COMPANY			
Registered Office Address:	1201 HAYS STREET			
	TALLAHASSEE FL3230108 m			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	<b>2</b> 5			
NEW Registered Agent:	MARCIO JASPAN			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	117 NORTH 31ST AVENUE			
	HOLLYWOOD ,FL33021			
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the FI and the business office of the registered agent will be identi liability 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	orida street address of the registered office			
Signature Standard or authorized representative of a member	-			
MARCIO JASPAN 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 provisions of all statutes relative to the provision of an I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address. Thereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.			
Signatur of Registered Agent	•			

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