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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE R 3150 BINNACLE, LLC

Certificate of Status	0
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G. MCLEOD

DEC - 7 2011

EXAMINER

https://efile.sunbiz.org/scripts/efilcovr.exe

12/6/2011

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: R 3150 BINNACLE, LLC		•
	_imited Liab	ility Company
Dear Sir or Madam:		•
The enclosed Registered Agent/Registered C	Office Change	e and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to	the following:
Rich Romash		
Name of Person	···	_
R 3150 BINNACLE, LLC		<u> </u>
Firm/Company	, ,	and the second of the second o
19 FAIR STREET		
Address Address		_
grant and the open for your		
CARMEL NY 10512 City/State and Zip Code	•	_ .
City/Suite and Zip Chie		
mybnoks1@aal.com		
E-mail address; (to be used for future annual report no	dification)	_
For further information concerning this matte	r, please call	:
Rich Romash	ลา (845	, 228-3903
Nume of Person		Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle		lahassee, Florida 32314
Tallahassee, Florida 32301		
Enclosed is a check for the following	g amount:	
☐ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy
INHS 18 (5/08)		
Hillian In Tay and		

("L015 - 11/16/2010 ET System Duline

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR RECISTERED 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: R3130 BilVN	ACIDE, INC		
2. (a) Principal office address of limited liability comp	any: 19 FAIR STREET		
(Note: MUST BE STREET ADDRESS)	CARMEL NY 10512 US	·	
(b) Mailing address of limited liability company:	19 FAIR STREET		,-
(Note: MAY BE POST OFFICE BOX)	CARMEL NY 10512 US		
09/25/2009	1.09000093084		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dep	ot, of State:	
Registered Agent:	NAPLES-LAWDOCK, INC.	ĭ.AE	=
Registered Office Address:	1395 PANTHER LANE 300	CRE AF	3
	NAPLES FL 34109 US	→ → →	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	EW Registered Office address C T Corporation System	Y OF STA	
NEW Registered Office Address: (MUST RE FLORIDA STREET ADDRESS)	1200 South Pine (s)and Road	NO.	ف
	Plantation	<u>,,[7],_33324</u>	<u>·</u> ·
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 ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other than the operating agreement of the limited liability company or as other than the operating agreement of the limited liability company.	Florida street address of the regentical. Or, in the case of a Flories) was/were authorized by an a	ristered offic ida limited ffirmative ve	ote on
Richard Romash		•	
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 fluties, and I am familier with and accept the obliquitons of my position us 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.

C. T. Corporation System

Assistant Secretary
Rebecca Buth

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

INFISTS (05/08)

11.015 - 111.042014 C.7 System Online