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Mikul Chaha IZin (Dla	
(City/State/Zip/Pho	one #)
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SECRETARY OF STATE
TALL AHASSEE FLOOR

D. BRUCE

APR 30 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT:	MAC1613, LLC	
Name of	Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are subm	itted for filing.
Please return all correspondence concerning	g this matter to the following:	
Deborah A. Wainey		
Name of Person		
		~~·! ~~·
Levins & Associates LLC	>	
Firm/Company	_	APR 29
		AS:
6843 Porto Fino Circle		<u> </u>
Address		
	· · · · · · · · ·	2.5 2.5 2.5
		콘스 선
Fort Myers, FL 33912	- Marie Carlos	A
City/State and Zip Code	•	
law@levinslegal.com E-mail address: (to be used for future annual report	i notification)	
For further information concerning this ma	tter, please call:	
Deborah A. Wainey	ut (== + /	-1197
Name of Person	Area Code & Daytime Tel	ephone 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 3231	4
Tallahassee, Florida 32301		
Enclosed is a check for the follow	ing amount:	
 √ \$25 Filing Fee	\$55 Filing Fee & Certi	ified 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.

Name of the limited liability company:	MAC1613, LLC	
2. (a) Principal office address of limited liability compar	ny: MAC1613, LLC	
(Note: MUST BE STREET ADDRESS)	3052 SW 27th Court Cape Coral, FL 33914	<u>-</u>
(b) Mailing address of limited liability company:		_
(Note: MAY BE POST OFFICE BOX)		_
11/9/09	L09000107769	_
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	n the records of the Florida Dept. of State:	
Registered Agent:	Jess W. Levins, Esq.	
Registered Office Address:	6110 Porto Fino Circle	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	Jess W. Levins, Esq.	j
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6843 Porto Fino Circle	_
	Fort Myers ,FL 33912	_
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability company, it is hereby confirmed that the change (so the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization	
Steven MacKellar, MGRM Printed or typed name of signee	<u> </u>	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the plant of am familiar with and accept the obligations of my plant of the company of the	agree to act in this capacity. I further agree to roper and complete performance of my duties, position as registered agent as provided for in serely reflect a change in the registered office ny has been notified in writing of this change.	o

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