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COVER LETTER

Division of Corporations								
Vina Del Mar Holdings, LLC								
Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to	o the following:							
Richard Q. Boylan								
Name of Person	 							
Name of Person								
Vina Del Mar Holdings, LLC								
Firm/Company								
316 13th Avenue North								
Address								
St Petersburg, FL 33701								
City/State and Zip Code								
RQBoylan@yahoo.com								
E-mail address: (to be used for future annual report	notification)							
For further information concerning this matter, please cal	1:							
Richard Q. Boylan 72:	7 363-6727							
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 32301	Tallahassee, Florida 32314							
Enclosed is a check for the following amount:								
■ \$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 605.0114 or 605.0116, 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.	Na	me of the limited liability company: Vina Del Mar I	Hold	ings, LLC			
2.	(a)	316 13th Avenue North	(b) 316 13th Avenue North				
2,	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limi (Note: MAY BE PO		
		St Petersburg, FL 33701		St Peters	sburg, FL 3370	1 .	
		03/02/2010		L1000002	23872		
3.5.	(a)	Date of filing/registration in Florida Richard Q. Boylan	4.		Document numbe	r	
J.	(a)	Registered Agent and Registered Office shown on the records of the 2950 Alton Drive	he Flo	rida Dept. of State	- e:		
		Registered Office Address <u>(MUST BE FLORIDA STREET ADDRESS)</u>			- Ā	Ω -	
		St Pete Beach , FL	3370	96	- CAPAS		
	(b)					-	1 kg kg
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	- 100 100 100 100 100 100 100 100 100 100	PH 1:1	Dest Services
		316 13th Avenue North			72.5 C. r		
		NEW Registered Office Address:			-		
		St Petersburg FL	3370)1	-		
the age was	cha nt v s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of the operating agreement of the	vs of the reality f the limite	he State of Flo gistered office company, it is imited liability	e and the business s hereby confirmed y company or as of npany.	office o	of the registered te change(s)
<u>-</u>	ignal	we of a member or authorized representative of a member.	_	iichaiu G. D	Printed or typed nam	e of sign	æ
I h pro the to i not	erel visi obl nere ifie	by accept the appointment as registered agent and agree of all statutes relative to the proper and complete in the proper and complete in the proper and complete in the registered agent as provided by reflect a change in the registered office address, I have the property of this change.	ee to perfo d for i nereb	act in this capermance of my on Chapter 605, confirm that	anity I further an	waa ta a	amply with the
		Division of Corporations P.O. B	30x 6	327• Tallahas	ssee, FL 32314		

FILING FEE: \$25.00