

L100000084223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

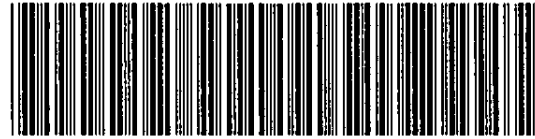
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 JUL 16 AM 8:14

FILED

J. SAULSBERRY  
EXAMINER

JUL 17 2012

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CASA TUA REALTY LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent <sup>and</sup> Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SVITLANA FIDLER

Name of Person

CASA TUA REALTY LLC

Firm/Company

1680 MICHIGAN AVE SUITE 700

Address

MIAMI BEACH/FL, 33139

City/State and Zip Code

INFO@CASATUAREALTY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SVITLANA FIDLER

Name of Person

at ( 305 )

523-9550

Area Code & Daytime Telephone Number

**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

or call (786) 262 0989

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: CASA TUA REALTY LLC

2. (a) Principal office address of limited liability company: 1680 MICHIGAN AVE #700

**(Note: MUST BE STREET ADDRESS)**

MIAMI BEACH, FL 33139

(b) Mailing address of limited liability company:

1680 MICHIGAN AVE #700

**(Note: MAY BE POST OFFICE BOX)**

MIAMI BEACH, FL 33139

08/11/2010

L10000084223

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

FIDLER, SVITLANA D

Registered Office Address:

6363 INDIAN CREEK DR #405  
MIAMI BEACH, FL 33141

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

FIDLER, SVITLANA

**NEW** Registered Office Address:

1680 MICHIGAN AVE #700

**(MUST BE FLORIDA STREET ADDRESS)**

MIAMI BEACH, FL 33139

FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

SVITLANA FIDLER

Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as 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.*

Signature of Registered Agent

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

**FILING FEE: \$25.00**