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G. MCLEOD

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**EXAMINER** 



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SELAETARY OF STATE
ALLI ABASSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Premier Recely Homes of Southwest Florida, LLC Name of Comporation
DOCUMENT NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Steve Bacardi Name of Contact Person
Premon Recity Homes of SW. Ft. Lic.
5621 Strand Blvd. #303
Address
Naples, Ft. 34110 City/State and Zip Code
Sfavebacardie asl. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stack Sucach at (239) 272 2387  Name of Contact Person Area Code & Daytime Telephone Number
. Name of Contact reison Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** 

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2012

STEVE BACARDI 5621 STRAND BLVD 303 NAPLES, FL 34110

SUBJECT: PREMIER REALTY HOMES OF SOUTHWEST FLORIDA, LLC.

Ref. Number: L10000128315

We have received your document for PREMIER REALTY HOMES OF SOUTHWEST FLORIDA, LLC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 512A00028865

Gina McLeod Regulatory Specialist II

www.sunbiz.org

## 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: Premier Realty Homes of Southwest Floriday Homes

3/07/12	L 16000128315
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:

Registered Office Address:

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

NEW Registered Agent:

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

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 opporating agreement of the limited liability company.

the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Stave Bacudi, Manaying Member

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 fatties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapler 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

ignature of Registered Agent

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