## 10000130442

(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(engletate)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
,		
Certified Copies Certificates of Status		

Special Instructions to Filing Officer:

L. SELLERS

OCT 14 2011

**EXAMINER** 

Office Use Only



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SECRETARY OF STATE
ALL AHASSEF FLORIDA

## COVER LETTER

Division of Corporations		
SUBJECT: FL Regal Palm	us Partners, LLC ed Liability Company	
Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Day Onders O.		
Dan Carless, Sr.  Name of Person		
ivadie of reison		
Coronado Realty Advisors, LLC		
Firm/Company		
9161 Jokes Both		
9161 Jakes Path Address	<del></del>	
. 1001.000		
Largo, FL 33771		
City/State and Zip Code		
DanC@CoronadoRealtvAdvisors.com		
DanC@CoronadoRealtyAdvisors.com  E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
, F, F		
D 0 1 0		
Dan Carless, Sr. at (	727 ) 373-9276	
Name of Person	Area Code & Daytime Telephone 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 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
<b> ✓</b> \$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 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: FL Ke	gal Valms Partners, LLC
2. (a) Principal office address of limited liability compar	my: 1230 Montana Aux
(Note: MUST BE STREET ADDRESS)	Suite 202 Santa Monica, CA 90403
(b) Mailing address of limited liability company:	1230 Montena Au
(Note: MAY BE POST OFFICE BOX)	Suite 202 Santa Monica, CA 90403
12/22/10	L10000130442
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:
Registered Agent:	Dan Carless, Sr.
Registered Office Address:	1380 Gulf Blvd. PH 8 Clearwater Beach, FL 33767
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	EW Registered Office address:
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	9161 Jakes Path
	<u>Largo</u> ,FL <u>33771</u>
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 of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the sestered office ntical. Or, in the case of a Florida limited (s) was/were authorized by a saffirm live was erwise provided in the articles fif organization
Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member  Dan Carless, Sr.	
Signature of a member or authorized representative of a member	

Signature of Registered Agent