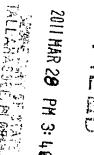
L11000014698

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Fing Officer					
MAR. 3 0 2010					
EXAMINER					

Office Use Only

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COVER LETTER

Division of Corporations				
SUBJECT:	RASKIN	PROP	ERY COM	IPANY LLC
			Liability Co	
Dear Sir or Madam:				
The enclosed Register	ed Agent/Registered	Office (Change and fe	ee(s) are submitted for filing.
Please return all corre	spondence concernin	ng this ma	atter to the fo	llowing:
CH	ARLES RASKIN			
	Name of Person			
RASKIN PR	OPERTY COMPA Firm/Company	NY LLC		
49	01 SEABEE AVE			
	Address			
NAPLE	ES, FLORIDA, 3410	08		
	y/State and Zip Code			
charle	es.raskin@nov.con	n		
E-mail address: (to be	es.raskin@nov.con used for future annual repor	t notificatio	n)	
For further information	n concerning this ma	atter, plea	ase call:	
CHARLE	S RASKIN	at (239)	4249299
Name of	Person		Area Co	de & Daytime Telephone Number
STREET/COU Registration Sec	RIER ADDRESS:		MAILING Registration	G ADDRESS: on Section
Division of Cor				f Corporations
Clifton Building			P.O. Box (
2661 Executive Tallahassee, Flo			1 allanasse	e, Florida 32314
Enclosed is a	check for the follow	ing amo	unt:	
\$25 Filing I	⁷ ee		\$55 Filin	ng Fee & Certified Copy

TO: Registration Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FÓR 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:RAS	KIN PROPERTY COMPANY LLC		
2. (a) Principal office address of limited liability comp	any: 491 SEABEE AVE		
(Note: MUST BE STREET ADDRESS)	NAPLES, FLORIDA, 34108		
(b) Mailing address of limited liability company:	491 SEABEE AVE		
(Note: MAY BE POST OFFICE BOX)	NAPLES, FLORIDA, 34108		
FEBRUARY 3, 2011	L11000014698 🗎		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Depti of State:		
Registered Agent:	CHARLES RASKIN COMMON MARKET M		
Registered Office Address:	151 QUAIL FOREST DR		
NEW Registered Agent:	491 SEABEE AVE		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NAPLES, FLORIDA, 34108		
ELECTION DE LE LECTION DE LECTION DE LE LECTION DE LECTION DE LE LECTION DE LE LECTION DE LE LECTION DE LE LECTION DE LECTION DE LE LECTION DE LECTION DE LE	,FL		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as old or the operating agreement of the limited liability company.	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote herwise provided in the articles of organization.		
CRIL C			
Signature of a member or authorized representative of a member			
CHARLES RASKIN Printed or typed name of signee			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the land I am familiar with and accept the obligations of the Chapter 608, F.S. Or, if this document is being filed to be address. I hereby confirm that the limited lightly composite	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office		

Signature of Registered Agent

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