L11000037311

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J. BRYAN

JUL 25 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	UBJECT: IL ESPORTATORE, L.L.C Name of Limited Liability Company		
Dear :	Sir or Madam:	• • •	
_ ou	on made in		
The en	nclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	
Please	return all correspondence concerni	ng this matter to the following:	
_	Juan A. Salva	······································	
	Name of Person		
	Firm/Company		
	3280 Hunters Chase Loc	JUL 22 PH 1:18 CORETARY OF STATE AND SEE: FLOW OF STATE OF STA	
	Address	P. P.	
	Kissimmee, Florida 3474	43	
	City/State and Zip Code		
E-	abdiel.salva@gmail.cor	n rt notification)	
For fu	rther information concerning this ma	atter, please call:	
	Juan A. Salva	at (321)305-9140	
	Name of Person	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	
	Enclosed is a check for the follow	ving 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 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.

Name of the limited liability company:	L ESPORTATORE, L.L.C			
2. (a) Principal office address of limited liability company	y: IL ESPORTATORE, L.L.C			
(Note: MUST BE STREET ADDRESS)	3280 Hunters Chase Loop Kissimmee, FL 34743			
(b) Mailing address of limited liability company:	IL ESPORTATORE, L.L.C.			
(Note: MAY BE POST OFFICE BOX)	3280 Hunters Chase Loop Kissimmee, FL 34743			
March 29, 2011	L11000037311			
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:	Juan A. Salva			
Registered Office Address:	9387 Flowering Cottonwood Res Orlando, FL			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address: Juan A. Salva			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3280 Hunters Chase Loop			
MOST BE TECKION STREET NOONESSY	Kissimmee ,FL34743			
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	_			
Juan A. Salva Printed or typed name of signee				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	igree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.			

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

Signature of Registered Agent