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

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A. LUNT

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EXAMINER

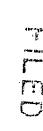
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJECT: Galleria of Merritt Island, LLC Name of Limited Liability Company			
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.	
Please	e return all correspondence concerning t	this matter to the following:	
	Alexander H. Bobinski Name of Person	· -	
	Galleria of Merritt Island, LLC		
	Firm/Company		
	1353 N. Courtenay Pkwy., Suite		
	Merritt Island, FL. 32953 City/State and Zip Code	SEE FLORIE	
E	samirelkabani@yahoo.com -mail address: (to be used for future annual report no	otification)	
For fi	urther information concerning this matte	er, please call:	
	Samir Elkabani Name of Person	at (321) 446-8864 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 following	g 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.

1. Name of the limited liability company:	Galleria of Merritt Island, LLC			
2. (a) Principal office address of limited liability cor	npany: 1353 N. Courtenay Parkway			
(Note: MUST BE STREET ADDRESS)	Suite T Merritt Island, FL. 32953			
(b) Mailing address of limited liability company:	Galleria of Merritt Island, LLC			
(Note: MAY BE POST OFFICE BOX)	1353 N. Courtenay Pkwy., Suite T Merritt Island, FL. 32953			
07/05/2011	L11000077665			
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:	Bobinski, Alexander H.			
Registered Office Address:	1351 N. Courtenay Parkway, STE AA			
·	Merritt Island, FL 32953			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address				
NEW Registered Agent:	(T) 00 (T)			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1353 N. Courtenay Parkway, Suite T			
	Merritt Island ,FL32953			
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 aer temper of the limited liability company. Signature of a member of authorized representative of a member				
Alexander H. Bobinski Printed or typed name of signee				
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to t and I am familiar with and accept the obligations of Chapter 608, F.S. Off, if this document is being filed taddress I hereby confirm that the limited liability confirm that the limited liability confirm that the limited liability confirm that	and agree to act in this capacity. I further agree to the proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office mpany 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