## 111000113565

(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 Filing Officer:				
R.A.				

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SECRETARY OF STATE

J. SAULSBERRY EXAMINER AUG 3 1 2012

## **COVER LETTER**

TO: Registration Sec Division of Corp				
SUBJECT:		CANA ENT Limited Liabil	ERPRISE, LL	_C
Dear Sir or Madam:				
The enclosed Registered	d Agent/Registered (	Office Change	and fee(s) are su	bmitted for filing.
Please return all corresp	ondence concerning	this matter to	the following:	
	R. MEROLA, ESC	).	_	
,•	anc of reison			
	R. MEROLA, P.A.	<u> </u>	_	
F	rm/Company			26 SE SE
11380 PROSPERITY FARMS RD., SUITE 204 Address			2012 AUG 29 SECRETARY ( ALLAHASSEE	
PALM BEACH GARDENS, FL 33410  City/State and Zip Code			AH LO 52  OF STATE  FLORIDA	
mero	a@bellsouth.net		<u> </u>	
E-mail address: (to be use	ed for future annual report	notification)		
For further information	concerning this mat	ter, please call	:	
JAMES R. ME Name of Pe		_ at ( <u>561</u>	Area Code & Daytime	622-1433 e Telephone Number
STREET/COUR Registration Section Division of Corportion Building 2661 Executive Control Tallahassee, Florida	orations Center Circle	Reg Div P.C	AILING ADDRES gistration Section vision of Corporati D. Box 6327 lahassee, Florida 3	ions
Enclosed is a cl	neck for the followi	ng amount:		
\$25 Filing Fe	e	☐ \$:	55 Filing Fee & C	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:	LA TOSCANA ENTERPRISE, LLC				
2. (a) Principal office address of limited liability	company: 1551 FORUM PLACE				
(Note: MUST BE STREET ADDRESS)	BUILDING 200 A WEST PALM BEACH, FL 33405				
(b) Mailing address of limited liability compar	y: 1551 FORUM PLACE				
(Note: MAY BE POST OFFICE BOX)	BUILDING 200 A WEST PALM BEACH, FL 33405				
10/04/2011	L11000113565				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office sh	nown on the records of the Florida Dept. of State:				
Registered Agent:	ALICIA B. PAJARES				
Registered Office Address:	236 BLOOMFIELD DRIVE WEST PALM BEACH, FL 33405				
(b) Enter name of <b>NEW Registered Agent</b> an <b>NEW</b> Registered Agent:	d/or NEW Registered Office address:  JAMES R. MEROLA, ESQ.				
NEW Registered Agent:  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRE	11380 PROSPERITY FARMS ROAD				
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					
ALICIA B. PAJARES					
Printed or typed name of signee  I hereby accept the appointment as registered agreemely with the provisions of all statutes relative and I am familiar with and accept the obligations Chapted 608, F.S. Or, if this document is being fix address, I hereby confirm that the limited liability	ent and agree to act in this capacity of further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in led to merely reflect a change in the registered office company has been notified in writing of this change.				
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00					

PIDITO I DD. 025100