Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H120001336943)))



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Karayan a sanan karan kara

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ADVOCATE CONSULTING LEGAL GROUP, PLLC

Account Number : I20090000001

Phone : (239)213-0066

Fax Number

: (239)213-0698

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE CAPITAL HOLDINGS 100, LLC

Certificate of Status	0
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EXAMINER

May 17-2012 03:12pm P002/003

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COVER LETTER

TO: Registration Section Division of Corporations				
2. 5. 1. 5. 5. 5. 4. 				
SUBJECT: CAPIT	AL HO	DLDIN	IGS 1	00, LLC
Name of	Limited	Liabili	ty Cor	npany
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	Office (Change	and fe	e(s) are submitted for filing.
Please return all correspondence concerning	g this m	after to	the fol	lowing:
RACHEL HALL				
Name of Person	·		_	
ADVOCATE CONSULTING LEGAL G	:ROUP	PHC		
Firm/Company	11001	<u>,</u>	_	
2072 HARCECHAE DE É ÉTI	E 210			
3073 HORSESHOE DR S STI Address				
NADITO EL 04404				
NAPLES, FL 34104 City/State and Zip Code	···		_	
	COM			
E-mail address: (to be used for future annual report	notification	on)		
For further information concerning this mat	tter, ple	ase call:		
	. *	220		213-0066
RACHEL HALL Name of Person	at (_	239) Area Coo	le & Daytime Telephone Number
		- ~ 4	TV T21-	mmmmco.
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		, 4		.,
Enclosed is a check for the following	ing am	ount:		
\$25 Filing Fee		\$5	5 Filin	g Fee & Certified Copy
INHS18 (5/08)				(((H12000133694 3)))

(((H12000133694 3)))

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.

t. Name of the limited liability company:	CAPITAL HOLDINGS 100, LLC
2. (a) Principal office address of limited liability com	pany: 2853 CAPISTRANO WAY
(Note: MUST BE STREET ADDRESS)	NAPLES, EL 34105
(b) Mailing address of limited liability company:	3073 HORSESHOE DR S STE 210
(Note: MAY BE POST OFFICE BOX)	NAPLES, FL 34104
3/1/12	L12000029552
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:	JOSEPH MARINO
Registered Office Address:	2853 CAPISTRANO WAY NAPLES, FL 34105
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address:
NEW Registered Office Address; (MUST BE FLORIDA STREET ADDRESS)	ြို့် တဲ့ (3073 HORSESHOE DR S SEE 210 ယ NAPLES F 34104
If the limited liability company is not organized under confirmed that after the change or changes are made, it and the business office of the registered agent will be i liability company, it is hereby confirmed that the change the members of the limited liability company or as cor the operating agreement of the limited liability company or as cor the operating agreement of the limited liability company or as Corporating agreement of the limited liability company. Signature of member or authorized approximative of a member	he Florida street address of the registered office dentical. Or, in the case of a Florida limited ge(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization
Printed or typed name of signer I hereby accept the appointment as registered agent a comply with the provisions of all stability relative to the and I am familiar with and docept the obligations of me Chapter 608, F.S. Or, if this document is being filed to address. I hereby confirm that the limited liability com Signature of Registered Agent Division of Corporations, P.O. Bo FILING FE	x 6327, Tallabassee, FL 32314
to week the second	men menter d

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