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(Re	questor's Name)			
(Ad	dress)			
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COVER LETTER

	egistration Section ivision of Corporations				
SUBJECT: SANTOS VENTURES, LLC Name of Limited Liability Company					
Dear Sir	or Madam:				
The enclo	osed Registered Agent/Registered Office	ice Change and fee(s) are submitted for filing.			
Please ret	turn all correspondence concerning this	is matter to the following:			
	LUIS SANTOS-ZANELLI				
	Name of Person	<u> </u>			
	SANTOS VENTURES, LLC				
	Firm/Company				
	6561 MARBELLA LANE				
	Address				
	NAPLES, FL 34105				
	City/State and Zip Code				
E-mai	LSANTOSZANELLI@GMAIL.COI il address: (to be used for future annual report notifi	om fication)			
For furth	er information concerning this matter,	please call:			
	LUIS SANTOS-ZANELLI a	at (239) 877-2133			
	Name of Person	Area Code & Daytime Telephone Number			
a	TO DEPOY COUNTY ADDRESS	MANUNC ADDDECO			
	TREET/COURIER ADDRESS: egistration Section	MAILING ADDRESS: Registration Section			
	egistration section vivision of Corporations	Division of Corporations			
	lifton Building	P.O. Box 6327			
	661 Executive Center Circle	Tallahassee, Florida 32314			
Ŧ	allahassee, Florida 32301				
E	inclosed is a check for the following	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:	SANTOS VENTURES, LLC					
2. (a) Principal office address of limited liability comp	any:	6561 MARBELLA LANE				
(Note: MUST BE STREET ADDRESS)	· 					
	NAPLES	FL 34105				
(b) Mailing address of limited liability company:	<u>65</u>	61 MARBELL	A LAN	IE		
(Note: MAY BE POST OFFICE BOX)						
(======================================	NAPLES	, FL 34105				
3/13/2012		L1200003	5501			
3. Date of filing/registration in Florida	4. Docume	ent number				
5. (a) Registered Agent and Registered Office shown	on the records	of the Florida l	Dept. of	f State	: :	
Registered Agent:	ANESSA	ALLEN SAN	<u>TÒS</u>	芯		
Registered Office Address:	6561 MA	RBELLA LAN	E**	AUG	· · · · · · · · · · · · · · · · · · ·	
	NAPLES	, FL 34105_	10.30	1	. 104	
			<u> </u>	9	3 (1)	
(b) Enter name of NEW Registered Agent and/or N	NFW Dogistor	ed Office add	"T)	Z = 2	V I	
(b) Enter hame of NEW Registered Agent and/or 1			- 	0 :Z	h, 15	
NEW Registered Agent:	LUIS SA	NTOS-ZANEL	LEX	2		
NEW Registered Office Address:	6561 MARBELLA LANE					
(MUST BE FLORIDA STREET ADDRESS)	NAPLES	NAPLES ,FL			34105	
If the limited liability company is not organized under to 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 of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company or authorized representative of a member	le Florida stree lentical. Or, in le(s) was/were	t address of the the case of a F authorized by a	registe Florida l an affir	red of limited mative	ffice d vote	
LUIS SANTOS ZANELLI						
Printed or typed name of signee						
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	nd agree to act proper and co position as re merely reflect vany has been	in this capacity implete perforn gistered agent a change in the notified in writ	v. I furt nance o as prov e regist ing of th	ther a f my o ided f ered o his che	gree to luties, for in office ange.	
Signature of Registered Agent						

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