1-1200064090

(Re	questor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 5, 2012

FL TRUST REAL ESTATE HOLDINGS, LLC 1242 S.W. PINE ISLAND RD, SUITE 42-275 CAPE CORAL, FL 33991

SUBJECT: FL TRUST REAL ESTATE HOLDINGS, LLC

Ref. Number: L12000064090

We have received your document for FL TRUST REAL ESTATE HOLDINGS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 612A00015934

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: FL Trust Real Esta Name of Limited L	ate Holdings, LLC Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing	3.
Please return all correspondence concerning this matt	ter to the following:	
Name of Person		
FL TRUST Real Estate Firm/Company	Holdings, ecc	
1242 S.W. Pine Isla	Holdings, ecc and Rd, suite 42-2	75
Capl Cokal FL 3 City/State and Zip Code	23991 SERRIA	2012 JN
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please	E S	
at (
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 following amou	nt:	
▼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: FI TLUS	T Real Estate Holdings, LL
2. (a) Principal office address of limited liability company	<i>V</i>
(Note: MUST BE STREET ADDRESS)	1242 S.W. Pine Island Rd, Suite 42-275
(b) Mailing address of limited liability company:	Cape Coral, FL 33991
(Note: MAY BE POST OFFICE BOX)	1242 S.W. Pine Island Rd, Suite 42-275 Cape Copa
5-11-8012	L12000064090 FL 3390
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:	Denise Aiolo Es E
Registered Office Address:	un Auboe Ciecle Et &
	Celebration FL 33474
(b) Enter name of NEW Dogistored Agent and/or NEV	W Registered Office address:
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	→ 1 ==
NEW Registered Agent:	MR. DEWITT F
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1242 J. W. Pine Island Rd 50:te 42-275 CADE CORAL ,FL 33991
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	lorida street address of the registered office ical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote wise provided in the articles of organization
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 pround I am familiar with and accept the obligations of my post Chapter 608, kfs. Or, if this document is being filed to me adaress, I hereby confirm that the limited liability company	gree 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.
Signature of Registered Agent	