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14 ANASSEE FLORIDA

C. LEWIS

MAY 2.4 2013

EXAMINER

COVER LETTER

Registration Section Division of Corporations

CASCADE ESTATE 22, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALAIN VAN DOOSSELAERE

Name of Person

PERSONALIZED BUSINESS SOLUTIONS INC.

Firm/Company

1800 SW 1ST AVENUE STE 306

Address

MIAMI, FL 33129

City/State and Zip Code

PERBUSSOL@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALAIN VAN DOOSSEL

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 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: CASCADE ESTATE 2	22, LLC
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	MIAMI, FL 33129
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1800 SW 1ST AVENUE STE 306 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
07/31/2012	L12000099706
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on Registered Agent:	n the records of the Florida Dept. of State:
Registered Office Address:	2701 S. BAYSHORE DRIVE SUITE 402 MIAMI, FL 33133
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	EW Registered Office address: ALAIN VAN DOOSSELAERE 1800 SW 1ST AVENUE STE 306
(MUST BE FLORIDA STREET ADDRESS)	MIAMI ,FL 33129
If the limited liability company is not organized under the	laws of the State of Florida it is hereby

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	
1	PIERRE BENSA	
V	Printed or typed name of signee	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provintions of all statutes relative to the proper and complete performance of my duties, and Lam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F,S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent