L12000139451

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COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT: MAPLE CREEK PARTNERS	MAPLE CREEK PARTNERS (FL), 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:								
Tamara Surratt								
Name of Person								
Legacy Family Office								
Firm/Company								
23160 Fashion Drive, Suite 227								
Address								
Estero, FL 33928								
City/State and Zip Code	,							
tsurratt@legacyfamilyoffice.com								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Tamara Surratt	239 949-1982 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 amount:								
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy							

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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	e limited liability company: MAPLE CRE	EK PAF	RTNERS ((FL), LLC		
2. (a	3560 F	ort Charles Drive	(b	(b) 3560 Fort Charles Drive			
(.		incipal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(<i></i>	Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO	-	
	NAPLI	ES, FL 34102		NAPLES	S, FL 34102		
	11/02/2	2012		L120001	39451		
 3. 5. (Date of filing/registration in Florida N & GRIGSBY, P.C.	4.		Document number		
<i>J.</i> (Registered	Agent and Registered Office shown on the records of ATO - 9110 STRADA PLACE	- e:				
	Registered STE 6	d Office Address (MUST BE FLORIDA STREET)	ADDRESS	<u>)</u>	_		
	NAPLE	ES, FL	34108		_		
(1	GEOR	GE HAMEL, JR.			7	3.0 13.0	
(Enter name of NEW Registered Agent and/or NEW Registered Office address:				<u> </u>	
	3560 F	FORT CHARLES DRIVE			ō	20日 12日 13日 13日	
	NEW Reg	gistered Office Address:			P1112:	12일 년 12일 12일	
	NAPLI	ES, FL	34102		<u>.</u>	er.	
the dager was/	hange or ch t will be ide were author	bility company is not organized under the landanges are made, the Florida street address of entical. Or, in the case of a Florida limited litized by an affirmative vote of the members organization or the operating agreement of the	the regis ability co of the lim	stered office ompany, it is sited liability iability con	e and the business office of the rest hereby confirmed that the changy company or as otherwise proving any.	egistered ge(s)	
Sig	nature of a me	ember or authorized representative of a member		<u> </u>	eorge Hamel, Jr. Printed or typed name of signee		
prov the o to m notij	isions of all obligations c erely reflect	the appointment as registered agent and agent statutes relative to the proper and complete of my position as registered agent as provide a change in the registered office address, I have a change. Agent Agent	ree to act perform d for in (hereby co	t in this cap ance of my Chapter 605 onfirm that	acity. I further agree to comply a duties, and I am familiar with an 5, F.S. Or, if this document is bet the limited liability company has	with the d accept ing filed been	