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2013 SEP -3 PM I2: 58

B. BOSTICK

SEP 0 4 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: ALELUSO REALTY 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:

INNOCENZO RUSSO

Name of Person

ALELUSO REALTY LLC

Firm/Company

2961 1ST AVE N #F

Address

ST PETERSBURG FL 33713

City/State and Zip Code

ALELUSOREALTY@GMAIL.COM

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

For further information concerning this matter, please call:

DANIELE

 $_{\rm at}$ 727 $_{\rm 1}$ 412-

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

2013 SEP -3 PHIZ: 51
SECREBARY OF LIVE FAMILY AHASSEE, FLORID

INHS18 (5/08)

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: ALELUSO REAL	Yuc .	<u></u>
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	nany: 2001 IST AVE N #F ST PETERSBUR	3 R. 33713
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2961 1ST AVE N #F ST PETERSBURG	G FL 33713
12/18/2012	L12000157732	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown	on the records of the Florida I	Dept. of State:
Registered Agent:	JACOB FISHER	
Registered Office Address:	13575 58TH STREET NORTH #200	
Rogistated Office Hattlesse.	CLEARWATER FL 33760	Dar.
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office addr	CESS SEE
NEW Registered Agent:	JOSEPH LOVETT	<u> </u>
NEW Registered Office Address:	2001 1ST-AVENUE NORTH-ID	
(MUST BE FLORIDA STREET ADDRESS)	ST PETERSBURG	FL same
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 is liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	ne Florida street address of the dentical. Or, in the case of a F se(a) was/were authorized by a rwise provided in the articles	registered office lorida limited n affirmative vote of
INNOCENZO RUSSO Printed or typed name of signee I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address) I hereby confirm that the limited liability com	nd agree to act in this capacity e proper and complete perforn y position as registered agent o merely reflect a change in th pany has been notified in writi	n. I further agree to nance of my auties, as provided for in e registered office ing of this change.
Signature of Registered Agent		•

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

INHS18 (05/08)