## 114000104141

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## COVER LETTER

Registration Section Division of Corporations

TO:

INHS18 (2/14)

SUBJECT: Manahou P	operties 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:		
Amber Briant.  Name of Person	······································	
Firm/Company	· · · · · · · · · · · · · · · · · · ·	
2813 Longfella Lord Address	Byron Place.	
Eugene Oregon  City/State and Zip Code  ambert briant Ogn  E-mail address: (to be used for future a	annual report notification)	
For further information concerning this matter, please call:		
Alex Berry Name of Person	at (56) 324 9543  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 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.

riorita.
1. Name of the limited liability company: Manahau Properties LLC
2. (a) 2813 hard Byron Place (b) 2813 hard Byron Place
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
Eugene, Oregon 97408 Eugene Oregon 97408
3. Date of filing/registration in Florida  4. Document number
3. Date of filing/registration in Florida 4. Document number
5. (a) NRAI Scrukes Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1200 S. Pine Island Road
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Plantation FL 33324 SET F
MAlex Berm
(b) Alex Dervy
Enter name of NEW Registered Agent and/or NEW Registered Office address:
713 NE 17th Road
NEW Registered Office Address:
Fort Landerdale FL 33304
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 Printed or hyped name of signee
I hereby accept the appointment as registered agent and garee to act in this capacity. I further garee to comply with the
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, 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
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