L14 000011 3 3275

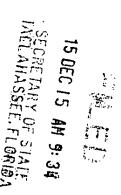
(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations		
SUBJECT: NAP CONSTRUCTION, LLC	nited Liability Company	
	nited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Char	age and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
SHAWN MCINTYRE		
Name of Person		
NORTH AMERICAN PROPERTIES – Southeast, Inc.		
Firm/Company		
1412 JACKSON STREET SUITE 1 Address		
Address		
FORT MYERS, FL 33901		
City/State and Zip Code		
SHAWN.MCINTYRE@NAPROPERTIES.COM		
E-mail address: (to be used for future annual repo	nt notification)	
For further information concerning this matter, please of	all:	
SHAWN MCINTYRE		
at (2 Name of Person	39) 850-3764 Area Code & Daytime Telephone Number	
Name of Person	Area Code & Daytine Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	Talialiassee, Piorida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTÈRED 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. N	ame of the limited liability company:NAP CON	ISTRUCTION	I, LLC
2. (a)		(b)	
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1412 JACKSON STREET SUITE 1		1412 JACKSON STREET SUITE 1
	FORT MYERS, FL 33901		FORT MYERS, FL 33901
	11/10/2014		M14000008141
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florida De	ot, of State:
	MAZZARANTANI, GEORGE H, ESQ.		
	LAW OFFICE OF GEORGE H. MAZZARANTA	NI, P.A.	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<u> </u>
	1800 SECOND STREET, SUITE 708		夏 夏 5
	SARASOTA , F	L 34236	HAS
			£ 5
(b)	SAMPLE ALL NEW		<u> </u>
	Enter name of NEW Registered Agent and/or NEW Registere	o Omce abores	STALLORAL
	SHAWN MCINTYRE		94 34
	NEW Registered Office Address:		
	1412 JACKSON STREET SUITE 1		
	FORT MYERS , F	L <u>33901</u>	
the chagent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the register liability comp of the limited e limited liab	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in illity company.
			SHAWN MCINTYRE Printed or typed name of signee
	ature of a member or authorized representative of a member		
I here provis the ob to med notifie	eby accept the appointment as registered agent and ag tions of all statutes relative to the proper and complete digations of my position as registered agent as provid- rely reflect alchange in the registered office address, I ed in writing of his change.	gree to act in e performanc ed for in Cha hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been

Signature of Registered Agent