1500170266

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section Division of Corporations									
SUBJECT: Casa Rosa, 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:									
. MARIANNE D. DARGONO									
MARIANNE R. PARSONS									
Name of Person									
LJ MANAGEMENT SERVICES, LLC									
Firm/Company									
2000 E EDGEWOOD DR #102									
Address									
LAKELAND, FL 33803									
City/State and Zip Code									
MARIANNE.PARSONS@LJMAN.COM									
E-mail address: (to be used for future annual report notification)									
For further information concerning this matter, please call:									
MARIANNE R PARSONS at (863) 668-7333									
Name of Person Area Code & Daytime Telephone Number									
STREET/COURIER ADDRESS: MAILING ADDRESS:									
Registration Section Registration Section									
Division of Corporations Division of Corporations									
Clifton Building P.O. Box 6327									
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301									
Enclosed is a check for the following amount:									
☑ \$25 Filing Fee									
_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.	Na	me of the limited liability company: CASA ROSA,	LLC	······································	· · · · · · · · · · · · · · · · · · ·				
2.	(a)	2000 E Edgewood Dr #102	(b	2000	E Edgewood Di	r #102	2		
_,	(-)	Principal office address of limited liability company:	_ (*	/	Mailing address of limited liability company:				
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE	POST C)FFICE	<u>BOX</u>)	
		Lakeland, FL 33803	_	Lakela	and, FL 33803		· · · · · ·	 	
			_				· · · · · · · · · · · · · · · · · · ·		
		10/6/2015		L15000)170266				
3.		Date of filing/registration in Florida	4.		Document num	ber			
5	(a)	GREGORY FANCELLI							
٥.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State			State:) NIS	ಹ	`	
		2000 E EDGEWOOD DR #102				Š	SEP	T)	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				of c	2		
		LAKELAND	33803			DIVISION OF CORPORATIONS	¥	M	
	(b)	, FL	33003			2	ڣ	O	
		MARIANNE R. PARSONS				IOKS	29		
		Enter name of NEW Registered Agent and/or NEW Registered (Office ad	iress:					
		2000 E EDGEWOOD DR #102							
		NEW Registered Office Address:	······································						
			`	· · · · - · · · · - · · · · · · · · ·					
		LAKELAND	33803						
									
If t	he li cha	mited liability company is not organized under the law nge or changes are made, the Florida street address of t	s of the	State of stered off	Florida, it is hereby	y confi ss offic	rmed the	at after	
age	ent v	vill be identical. Or, in the case of a Florida limited lial	bility co	mpany, i	it is hereby confirm	ned tha	t the ch	ange(s)	
		ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l				omerv	vise pro	vided in	
		Oak Mi	MA	NAGEF	3 Gregory	Fan	cell	i	
S	ignat	ure of a member or authorized representative of a member			Printed or typed n	ame of s	ignee		
I h pro the to i	ierel ovisio obli mere tifiec	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I have him writing of this change.	ee to act perform for in (ereby co	in this cance of n Chapter to onfirm th	apacity. I further only duties, and I am 505, F.S. Or, if this at the limited liabi	agree t familie s docur lity con	o compl ar with nent is i npany h	ly with the and accept being filed as been	
	$l \mathbb{A}$	of Registered Agent							