6000012897

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Do	cument Number)						
Certified Copies	ed Copies Certificates of Status						
Special Instructions to Filing Officer:							

Office Use Only



500279395085

02/08/16--01001--020 **135.00

16 FEB -5 PM 5: 16

FEB 0 8 2016 Y SULKER

COVER LETTER

	stration Section sion of Corporations		#		
CUDIECT.	Nurtas, LLC				
SUBJECT:	Name of Limited Liability Company				
Dear Sir or M	fadam:				
The enclosed	Registered Agent/Registered Offic	e Change and fo	ee(s) are submitted for filing.		
Please return	all correspondence concerning this	matter to the fo	ollowing:		
J. Stephen	Crawford				
	Name of Person		_		
Crawford 8	Crawford, Chartered				
	Firm/Company		_		
3755 Liber	ty Square				
	Address	 	-		
Fort Myers	, Florida 33908				
	City/State and Zip Code		_		
crawlaw@	aol.com				
E-mail	address: (to be used for future annua	al report notific	ation)		
For further in	formation concerning this matter, p	lease call:			
J. Stephen	Crawford	239 at (822-7038		
	Name of Person		Area Code & Daytime Telephone Number		
Regis Divis Clifto 2661 Talla	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301 used is a check for the following a	Regi Divis P.O. Talla	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314		
	5 Filing Fee		Filing Fee & Certified Copy		
_ ,_	<u> </u>	- 4	J		

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.

. Na	Nurtas, LLC ame of the limited liability company:				
. (a)	3755 Liberty Square, Fort Myers, FL 33908	(1	6017 Pi	ne Ridge Rd.,	Naples, FL 34119
. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	('			mited liability company: POST OFFICE BOX)
	01/19/2016		L160000	12897	
. (a)	Date of filing/registration in Florida Irene Kharlamov	4.		Document numb	per
(u)	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of State	e:	
	Registered Office Address <u>(MUST BE FLORIDA STREET A</u> 6130 Montelena Circle, #1201	DDRES:	<u>27</u>	-	
	Naples . FL	34119		-	元
(b)	7			-	68
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ldress:	-	5 2 11
	Crawlaw, LLC				15:16
	NEW Registered Office Address: 3755 Liberty Square			· -	6
	Fort Myers	33908			
e cha ent w as/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liabre.	the regi bility co f the lin limited	stered office ompany, it is nited liability	e and the business s hereby confirme y company or as on pany.	s office of the registere ed that the change(s)
_	ure of a member or authorized representative of a member			Printed or typed na	-
いいけいし	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete in ignitions of my position as registered agent as provided by reflect a change in the registered office address, I have fing af this change.	norinrm	ance of my	duties and Lami	familiar with and accer
gratu	re of Registered Agent				