## 14000098464

(F	Requestor's Name)	
· (A	Address)	
	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	MAIL MAIL	
(E	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Liner (ass 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:	
Marina Paraboschi (Wis Natoli) Name of Person	
Firm/Company	
3936 Spygloss HIII Rol.	
Sarasala Fla. 34238 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)  Eor further information concerning this matter, please cells	7
For further information concerning this matter, please call:	2.00
Morino Para boschi at (945) 2019 - 08 39 To Name of Person Area Code & Daytime Telephone Number N	i p.
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 \$ S55 Filing Fee & Certified Copy	
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. Name of the limited liability company:	<u>.</u>
2. (a) 3936 Spyaloss Hill Pd. (b)	
Principal office address of finited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Soius cto Flo. 34238	(NOIE. MAT BE FUST OFFICE BOX)
<u> </u>	
3. Date of filing/registration in Florida 4.	16000098464
3. Date of filing/registration in Florida 4.	Document number
5. (a) Charles Paraboschi Et	IN 81-2688090
Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta	te:
3936 SMaloss Hill Rd	_
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	_
Soissota Fla. 34238	
Pi	
, F1	
(b) Marina Paraboschi	17. h
Enter name of NEW Registered Agent and/or NEW Registered Office address:	
NEW Registered Office Address:	∑
	_
, FL	_
If the limited liability company is not organized under the laws of the State of Fl	orida, it is hereby confirmed that after
the change or changes are made, the Florida street address of the registered office agent will be identical. Or, in the case of a Florida limited liability company, it	c and the business office of the registered
was/were authorized by an affirmative vote of the members of the limited liabili	ty company or as otherwise provided in
the articles of organization or the operating agreement of the limited liability con	
Morana Octalusche Marina Signature of a member or authorized representative of a member	Printed or typed name of signce
provisions of all statutes relative to the proper and complete performance of my	duties, and I am familiar with and accept
I hereby accept the appointment as registered agent and agree to act in this cap provisions of all statutes relative to the proper and complete performance of my the obligations of my position as registered agent as provided for in Chapter 60. To merely reflect a change in the registered office address, I hereby confirm that	o, r.s. Ur, if this document is being filed the limited liability company has been
notified in writing of this change.  No year Pola Couche	
Signature of Penistered Agent	

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