## 46000113901

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

Office Use Only



900316024299

D.726/10--01014--011 \*\*8 .5

FALLAHASSEF FLORIOZ

FILED
2010 JUL 26 AK 12: 23

ULS 1.8

## **COVER LETTER**

TO:

Registration Section

Division of Corporations									
Mesa 21 Lake Ivanhoe, LLC SUBJECT:									
Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Agent/Registered Offi	ce Change and	fec(s) are submitte	ed for filing.						
Please return all correspondence concerning thi	s matter to the	following:							
Sandra Rios									
Name of Person		_							
Mesa 21									
Firm/Company									
1414 N Orange Ave.									
Address									
Orlando, FL 32804									
City/State and Zip Code		<del></del>							
sandra@mesa21.comz									
E-mail address: (to be used for future ann	ual report notifi	ication)							
For further information concerning this matter,	please call:								
Sandra Rios	407 at (	930-8000	18505089186						
Name of Person		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:								
<b>☑</b> \$25 Filing Fee	□ \$55 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.

I. Na	Mesa 21 Lak	e Ivanh	oe, LLC					
2. (a)	Mesa 21 Lake Ivanhoe, LLC	(h	Mesa 21 Lake Ivanhoe, LLC					
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  1414 N Orange Ave.	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  1414 N Orange Ave.						
	Orlando, FL 32804		Orlando	, FL 32804		<u>-</u>		
	June 14, 2016	- <del></del>	L160001	13901				
3.	Date of filing/registration in Florida	4.		Document number	er			
5. (a)	Registered Agent and Registered Office shown on the records of Sandra Rios	f the Florida	Dept. of State	- e:				
	Registered Office Address (MUST BE FLORIDA STREET 13506 Summerport Village Parkway, Suite		2	-	ç	_		
	Windermere , FI	34786 L	•	_	VE LA	701 <b>8</b> J		
(b)				_	AHASSE	2018 JUL 216	FILE	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Sandra Rios	d Office add	<u>iress</u> :		C. FLORIG	AM 12:	ED	
	NEW Registered Office Address:			_	<u> </u>	5		
	1414 N Orange Ave.		<u>-</u>	_				
	Orlando , FI	32804 L		_				
the cha agent v was/we the arti Signa I here provisi the obl to mere notified	imited liability company is not organized under the launge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited library and the company of the members cless of organization or the operating agreement of the ture of a member or authorized incresentative of a member by accept the appointment as registered agent and aging of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I if in writing of this chapge.	f the regis iability co of the lim e limited I Sar	stered office empany, it is ited liabilit iability con adra Rios	e and the business is hereby confirmed or as on pany.  Printed or typed name or active. I further as	office of d that the otherwise	the regice change provide	stered (s) d in	

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