L17000029137

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K. SALY AUG -2 2018

COVER LETTER

Divi	sion of Corporations			
SUBJECT:	2314 N Lumina Ave Investment, LLC			
SOBJECT.	Name of Limited Liability Company			
Dear Sir or N	Madam:			
The enclosed	d Registered Agent/Registered Office	Change and	fee(s) are submitted for filing.	
Please return	all correspondence concerning this r	natter to the	following:	
J C Poinde	exter			
	Name of Person		_	
MPM Inve	stors, LLC			
	Firm/Company			
1217 Cape	e Coral PKWY East #114			
	Address		_	
Cape Cora	al, FL 33904			
	City/State and Zip Code		_	
poindexter	r.jc@gmail.com			
E-mail	address: (to be used for future annual	report notifi	cation)	
For further in	nformation concerning this matter, plo	ease call:		
JC Poinde		540 at (588-0105	
	Name of Person		Area Code & Daytime Telephone Number	
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	Reg Div P.C	AILING ADDRESS: gistration Section vision of Corporations 0. Box 6327 lahassee, Florida 32314	
Encl	losed is a check for the following an	nount:		
⊠ S∶	25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

TO:

Registration Section

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. N	lame of the limited liability company: 2314 Lum	ina Investm	ent, LLC
2. (a)	1217 Cane Coral PKWV Fast #114	(b)	
_, (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Cape Coral, FL 33904		
			L17000029137
3.	Date of filing/registration in Florida	4.	Document number
5. (a	·		
	Registered Agent and Registered Office shown on the record Dave Foster	Is of the Florida I	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STRE	CET ADDRESS	
	130 40th Ave SE	<u>ELI ADDRESS)</u>	TALL.
	St Petersburg	. FL_33705	FILED JUL 26 AM 1:50 LAHASSEE, FLORIG
	JC Poindexer		
(b)	Enter name of NEW Registered Agent and/or NEW Regist	tered Office addr	ENS:
			ATE ARIOA
	NEW Registered Office Address:		
	1217 Cape Coral PKWY East		
	Cape Coral	, FL 33904	
the ch agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite were authorized by an affurnative vote of the membericles of organization or the operating agreement of	ss of the registed liability con ers of the limit I the limited lia	ered office and the business office of the registered npany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in ability company.
<u></u>	Mary formation of a market	Andr - —	ew C McCabe
-	ature of a member or authorized representative of a member eby accept the appointment as registered agent and	Laoree to act i	Printed or typed name of signee or this canacity. I further garee to comply with the
provis the ob- to med	to decept the appointment as registered agent and compositions of all statutes relative to the proper and compositions of my position as registered agent as proved reflect a change in the registered office addressed in writing of this change.	ilele performai	ice of my duties, and I am familiar with and accept
Signal	ure of Registered Agent	-	

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