L99000001564

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Busiless Lifety Name) |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

T. HAMPTON

JUL - 1 2008

EXAMINER

COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: DELLACASA, LLC (Name of Limited Liability Company) |
| (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: |
| LAWRENCE D. SILVERMAN, ESQ. |
| (Name of Person) |
| SILVERMAN, COSGROVE & SAMMATARO |
| (Firm/Company) |
| 1 Biscayne Tower, 2 South Biscayne Blvd., Suite 2650 |
| (Address) |
| |
| Miami, Florida 33131 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| LAWRENCE D. SILVERMAN, ESQ. at (305) 377-1666 |
| (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 |



June 26, 2008

Registration Section Division of Corporations P.O. BOX 6327 Tallahassee, FL 32314

Re: Change of Registered Agent DELLACASA, LLC

Dear Sir or Madam:

Enclosed please find a duly executed Statement of Change of Registered Agent for Dellacasa, LLC. We are also enclosing a check for \$25.00 in payment of your fee.

Please call me with any questions or concerns.

Diana Zulueta

Sincerely,

Litigation Consultant

Enclosure



July 7, 2008

Florida Department of State ATTN: TAMMY HAMPTON Registration Section Division of Corporations P.O. BOX 6327 Tallahassee, FL 32314

Re: Change of Registered Agent DELLACASA, LLC

Dear Ms. Hampton:

Enclosed please find a duly executed Statement of Change of Registered Agent for Dellacasa, LLC. We inadvertently submitted the statement without the designation acceptance by the registered agent. We apologize for any inconvenience.

Please call me with any questions or concerns.

Sincerely,

Diana Zulueta

Litigation Consultant

Enclosure

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Enclosed please find a doly associated Summord of Change of Registered Again for Deliacusa, LLC. We inside donly submitted the statement without the designation acceptance by the registered again. We applied to the any haconvenience.

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TATE OF DA

July 1, 2008

LAWRENCE D SILVERMAN, ESQ SILVERMAN COSGROVE & SAMMATARO 2 S BISCAYNE BLVD - STE 2650 MIAMI, FL 33131

SUBJECT: DELLACASA,LLC Ref. Number: L99000001564

We have received your document for DELLACASA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 808A00039297

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: DELLACA | SA, LLC | |
|---|--|---|
| 2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS) | ny: 3900 Executive Way Miramar, FI 33025 | |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | 3900 Executive Way Miramar, FI 33025 | |
| 3/18/1999 3. Date of filing/registration in Florida | L99000001564 4. Document number CORD | -9 PH 2: |
| 5. (a) Registered Agent and Registered Office shown of | n the records of the Florida Dept. of State: | 06 |
| Registered Agent: | Zach Shelomith, Esq. | |
| Registered Office Address: | 2699 Stirling Road Suite C401 Ft. Lauderdale, FL 33312 | Đ |
| (b) Enter name of NEW Registered Agent and/or N | EW Registered Office address: | |
| NEW Registered Agent: | LAWRENCE D. SILVERMAN, ESQ. | 0 |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 1 Biscayne Tower, 2 South Biscayne Blvd. Suite 2650 Miami,FL 33131 | |
| If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as atthetwise provided in the articles limited liability company. (Signature of a member or authorized consentative of a member) | e laws of the State of Florida, it is hereby concert address of the registered office and the coase of a Florida limited liability company | onfirmed business . it is |
| Printed or typed name of signee) | w of bendass inc. | |
| I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notif | l agree to act in this capacity. I further agr proper and complete performance of my du on as registered agent as provided for in Cl a change in the registered office address, I ied in writing of this change. | ee to ties, and I papter 608, hereby |

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

INHS18 (05/08)