

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

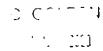
**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC REGISTERED AGENT CHANGE MS RIALTO RIVER MARINA FL, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00





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: MS Riato River	r Marin	e FL, LLC			
2. (a)	700 NW 107TH AVE		(b) 15131 A	LTON PARKWAY, S	UITB 345	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	4TH FL0	d liability company: TOFFICE BOX) DEPT		
	MIAMI, FL 33172		Irvine, C	A 92618		
	11/27/2007		M0700000	6927		
3. 5. (a	Date of filing/registration in Florida CT CORPORATION SYSTEM	4,		Document number	,	-
. (-	Registered Agent and Registered Office shown on the records o 1200 SOUTH PINE ISLAND ROAD	f the Flo	rida Dept of Stu	te:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)	_		
	PLANTATION , F	L_3332		_	2026.1	
(b)	Corporate Creations Network Inc.			-	27	
	Enter name of NEW Registered Agent and/or NEW Registere	d Office	#ddress:		P:	٠.
	801 US Highway 1				င့ာ	لاث
	NEW Registered Office Address:			-	4.5	
	North Palm Beach	3340 L	8	_		
chang agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members incles of organization or the operating agreement of the	ws of the limite	he State of Flered office an company, it is imited liability defined liability con	d the business office s hereby confirmed the company or as othe npany. an, Attorney-in-Fact	of the registe hat the change erwise provide	red e(s)
•	nure of a member or authorized representative of a member		and the set of the set	Printed or typed name o		ioh oha
provis he ob o mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing a fine change.	perjor ed for ii hereby	<i>mance o</i> rmu.	anties ana Lamianni	uar wun ana	accen
Signan	Danielle Gossman, Special Secre	tary				