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(Requestor's Name)		
(Address)		
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates o	of Status
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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B. KOHR

FEB 1 7 2010

EXAMINER



January 20, 2010

LES STRACHER, ESQ. 2900 GLADES CIRCLE SUITE 700 WESTON, FL 33327

SUBJECT: NAPLETON'S CORAL SPRINGS IMPORTS, LLC

Ref. Number: M09000002791

We have received your document for NAPLETON'S CORAL SPRINGS IMPORTS, LLC and your check(s) totaling \$245.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6067.

Letter Number: 710A00001487

Neysa Culligan Regulatory Specialist II 10 (C) 1 7 11:58

COVER LETTER

Amendment Section Division of Corporations TO: SI D Tl ΡĮ

SUBJECT: Napieton's Coral Springs Imports, LLC Name of Corporation				
		•		
DOCUMENT NUM	IBER: M090	000002791		
The enclosed Statem	ent of Change of Registered Office	/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:				
Les Stracher, Esq. Name of Contact Person				
	Name of Con	tact Person		
Firm/Company				
_	2900 Glades Ci			
	Addr	ess		
	Weston, Flo	rida 33327		
	City/State and	d Zip Code		
	les@kurkinbra	andes com		
Ē	-mail address: (to be used for fu			
For further information	on concerning this matter, please ca	all:		
l es	s Stracher, Esq.	954 > 703-1946		
Name	e of Contact Person	at (954) 703-1946 Area Code & Daytime Telephone Number		
Englaced is a \$25.00	ahaali mada manahla sa sha Danam			
Enclosed is a \$35.00	check made payable to the Departr	nent of State.		
	Mailing Address:	Street Address:		
	Mailing Address: Amendment Section	Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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AWhen you need ACCESS to the world≅

236 East 6th Avenue . Tallahassee, Florida 32303

	P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850)	0) 222-1666 اور چ
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	CERTIFIED COPY	. 50 Care
Х	РНОТОСОРУ	
	CUS	
\square	FILING Statement of Change	
l	Napleton's Coral Springs Imports, 115	
_	(CORPORATE NAME AND DOCUMENT #)	
• -	(CORPORATE NAME AND DOCUMENT #)	
• -	(CORPORATE NAME AND DOCUMENT #)	-
	(CORPORATE NAME AND DOCUMENT #)	
·	CORPORATE NAME AND DOCUMENT #)	
PECIAL	instructions: <u>Rejection on file</u>	

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.

Name of the limited liability company:Napleto	on's Coral Springs Imports, Lice	
2. (a) Principal office address of limited liability company	5555 N. State Road 7076	
(Note: MUST BE STREET ADDRESS)	Coral Springs, Florida 33067	
(b) Mailing address of limited liability company:	5555 N. State Road 7	
(Note: MAY BE POST OFFICE BOX)	Coral Springs, Florida 33067	
07/20/2009	M09000002791	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	Les Stracher, Esq.	
Registered Office Address:	401 East Las Olas Blvd., Suite 1650	
	Ft. Lauderdale, Florida 33301	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	V Registered Office address: 2900 Glades Circle, Suite 700	
(MUST BE FLORIDA STREET ADDRESS)	Weston ,FL33327	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization	
Edward F. Napleton Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province of and I am familiar with and accept the obligations of my portugates of the province of th	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	
Signature of Registered Agent		

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