MD9000004806

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Certified Copies		Certificate	es of S	Status
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Special Instructions to Filing Officer:

L. SELLERS

AUG 2.8 2010

EXAMINER

Office Use Only



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SEGRETARY OF STATE
STATE ATTACKS.E.F.LORIO

COVER LETTER

Division of Corporations
SUBJECT: Casa acquisitions LLC Name of Foreign Limited Liability Company
Dear Sir or Madam:
The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Osward Carreron Name of Person
Casa acquisitions, LC
1136 First Street S.
Winter Haven, PL 33880 City/State and Zip Code
Ozzie @ area real estate. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: OSWALD CARVERON _{at} (863) 294-3384
Name of Person Area Code and 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: \$25 Filing Fee \$\times \text{S55.00 Filing Fee & Certificate of Status & Certified Copy} \$\$ Certificate of Status & Certified Copy}\$\$



August 9, 2010

OSWALD P. CARREROU 1136 FIRST STREET S WINTER HAVEN, FL 33880

SUBJECT: CASA ACQUISITIONS, LLC

Ref. Number: M0900004806

We have received your document for CASA ACQUISITIONS, 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):

Enclosed are the forms required to change the registered agent and managers/managing members of a Foreign LLC qualified to conduct business in Florida. The fee for each filing is \$25.00, therefore, there is a balance due of \$25.00. You may email our office a change in mailing address and principal place of business address at no charge from www.sunbiz.org.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 210A00019107

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

1. The name of the limited liability compand Department of State is:	ny as it appears on the records of the	e Florida	1 .
2. This entity was formed under the laws of			
	. (
3. This entity was authorized to transact bu and its Florida document/registration number) 	
4. The name and address of each manager of	or managing member is as follows:		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	OSWALD Carre 1136 First street S Winter Haven FC	101 3388	<u> </u>
·			
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· ———			
		¥SD	.
Required Signature: Signature of Manager,	, Managing Member or Member	ORETARY DAHASS	AUG 20
Filing	m CR		