# MB000002800

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

Office Use Only



500248605175

06/10/13--01020--008 \*\*25.00

13 JUN 10 PH 2: 46

SECRETARY OF STATE OIVISION OF CORFORATIONS

'JUN 1 1 2013

T. HAMPTON

### **COVER LETTER**

TO: Registration Section

Division of Corporations

SUBJECT: Ocala Florida Investment Associates, 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:

Т	im	othy	/ J.	Laitu	r
•		~ ,	•		•

Name of Person

Attorney at Law

Firm/Company

13675 Shady Lane

Address

Monroe, MI. 48161

City/State and Zip Code

tjlesq@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Timothy Laitur** 

,,734 \652-8660

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

□ \$30 Filing Fee & Certificate of Status

□ \$55.00 Filing Fee & Certified Copy

☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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

1. The name of the limited liability compan Department of State is: Ocala Florida Investment As		<b>~·</b>
2. This entity was formed under the laws of	The State of Michigan	<b></b> ·
3. This entity was authorized to transact but and its Florida document/registration number		·
4. The name and address of each manager of	or managing member is as follows:	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Kanti Shah	
	398 Santure	<del></del>
	Manroe, MI 48162	<b></b>
		~- ~- ~- ~-
		SECRE DIVISION
		OF CORPO
Required Signature: Signature of Manager, I	A 11 '	STATE ORATIONS 1 2: 46

Filing Fee: \$25