## 95000001483

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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B. KOHR DEC 2 0 2011

**EXAMINER** 



800214656978



ACCOUNT NO. : I2000000195

REFERENCE : 032536 7860016

AUTHORIZATION \_\_\_\_

COST LIMIT (:)

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ORDER DATE : December 20, 2011

ORDER TIME : 10:36 AM

ORDER NO. : 032536-001

CUSTOMER NO: 7860016

## CHANGE OF AGENT

NAME: AEC/PINES DEVELOPMENT, LTD.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. AEC/PINES DEVE	ELOPMENT, LTD.		
Name o	of Limited Partnership or I	Limited Liability Limited Par	rtnership
2. 10/03/1995		3. A950000014	483
Date of filing/reg	istration in Florida	Florida o	locument number
4. The name of the registe Department of State:	red agent and the register	ed office address as shown o	n the records of the Florida
СТ	Corporation System		
<del></del>	N	lame	
12	00 South Pine Island	Road	
	Ac	ldress	
Pla	intation, FL 33324		
	City, St	ate and Zip	
5. The name and Florida s	treet address of the new re	egistered agent and/or office:	:
Co	rporation Service Cor	npany	
	N	ame	<del></del>
120	01 Hays Street		
	Florida street address (	P.O. Box not acceptable)	<del></del>
Ta	llahassec	FL 32301	
	City, Sta	ate and Zip	
6. Such change(s) is/are et	ffective when filed by the	Florida Department of State.	
Maure	- Cath		
	President on behalf of	AERC Windsor Pines, In	
		and agree to act in this capa the proper and complete per	
and I am familiar with an a	accept the obligations of n	me proper and complete per, 1y position as registered age	
By: Corporation Serv	ice Company		
Signature of Registered A	lent Sylvia Queppet, A	- Asst. Vice President	
Filing Fee:	\$35.00		
Certified Copy (option	onal): \$52.50		