

L0000000836

KAUFMAN & ROTHEFEDER  
A PROFESSIONAL CORPORATION  
POST OFFICE DRAWER 4540  
MONTGOMERY, ALABAMA 36103-4540

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

- 1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 500003590335--5  
-01/29/01--01107--009
- 2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) \*\*\*\*\*25.00 \*\*\*\*\*25.00
- 3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

FILED  
01 JAN 29 PM 5:00  
SECRETARY OF STATE  
MONTGOMERY ALABAMA

- Walk in       Pick up time \_\_\_\_\_       Certified Copy
- Mail out       Will wait       Photocopy       Certificate of Status

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

L00-836  
OK

Examiner's Initials

**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.*

1. The name of the limited liability company is: Southeast Subway Development Company, L.L.C.

2. The mailing address of the limited liability company is: 3801 N.W. 40th Terrace  
Suite A, Gainesville FL 32606-6183

January 21, 2000  
3. Date of filing/registration in Florida

L00000000836  
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CT Corporation Systems  
Name  
1200 South Pine Island Road - Team 1  
Address  
Plantation FL 33324  
City, State and Zip

6. The name and address of the new registered agent and/or office:

Jim Lenhard, Manager  
Name  
4043 Baymeadows Road  
Florida street address (P.O. Box NOT acceptable)  
Jacksonville FL 32217  
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Julius K. Love Jr.  
(Signature of a member or authorized representative of a member)

Julius K. Love Jr.  
(Printed or typed name of signee)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature]  
(Signature of Registered Agent)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
01 JAN 2000 5:00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314