L0700008112

(Red	questor's Name)		
(Add	lress)		
•	•		

(Add	lress)		
· (City	/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
		_	
(Bus	iness Entity Nar	ne)	
(Doc	ument Number)		
Certified Copies	Certificates	of Status	
Certified Copies	Certificates	o o olatus	
Special Instructions to Filing Officer:			
		ì	
	`		
	· · · · · · · · · · · · · · · · · · ·		

Office Use Only



100112947401

12/10/07--01019--011 **50.00

07 DEC 10 AM 11: 20
SECRETARY OF STATE
AND AM ASSET FLORID



Sivyer Barlow & Watson, P.A.

ATTORNEYS AT LAW

MAILON H. BARLOW, III

R.J. HAUGHEY, II

EDWARD J. KUCHINSKI

J. CARLTON MITCHELL

MELISSA GIVENS RADCLIFF

NEAL A. SIVYER

STEPHEN E. WALKER

PAUL D. WATSON

SunTrust Financial Centre 401 E. Jackson Street Suite 2225 Tampa, FL 33602 (813) 221-4242 Fax: (813) 227-8598 www.sbwlegal.com OF COUNSEL

GAIL M. ABERCROMBIE

DAVID S. WATSON

SENDER'S EMAIL:

ppersonius@sbwlegal.com

December 5, 2007

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Registered Agent Statement of Change

Our File No.: 8397.0

Dear Sir or Madam:

Enclosed please find two separate Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company forms and our firm check in the amount of \$50.00 (\$25.00 for each entity) to serve as payment for processing for each entity. Please file these forms with the Secretary of State as soon as possible.

Should you have any questions or need additional information, please do not hesitate to contact me.

Sincerely,

Patricia A. Personius

Legal Assistant to R.J. Haughey, II

RJH/pap

Encl. The Art Market

COVER LETTER

Division of Corporations			
SUBJECT: River Run Mobile Home Park, LLC (Name of Limited Liability Company)			
Dear Sir or Madam:	-		
The enclosed Registered Agent/Registered Office Office	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this m	atter to the following:		
R.J. Haughey, II, Esq. (Name of Person)			
Sivyer Barlow & Watson, P.A.			
(Firm/Company)			
401 E. Jackson Street, Suite 2225			
(Address)			
Tampa, Florida 33602			
(City/State and Zip Code)			
For further information concerning this matter, plea	ase call:		
R.J. Haughey, IIat (8	313) 221-4242		
(Name of Person)	(Area Code & 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 amo	ount:		
	\$55 Filing Fee & Certified Copy		

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 liabi	ility company is: River Run	Mobile Home Park, LLC	·
2. The mailing address of the li	mited liability company is:	2018 Phyllis Place, #21	,
Tampa, Florida 33619			
January 22, 2007		L07000008112	
3. Date of filing/registration in Florida		4. Document number	
5. The name of the registered ag Florida Department of State:	<u>-</u>	address as shown on the r	ecords of the
<u>Spie</u>	egel & Utrera, P.A. Name		
1840	O SW 22nd Street, 4th F	loor	
<u></u>	Address		系 可
<u>Mian</u>	ni, FL 33145	···	LAGE CO
	City, State and Z	•	瑟 5
6. The name and address of the	new registered agent and/or	office:	SEC - III
R.J.	Haughey, II		FS = C
401 E	Name E. Jackson Street, Suite ida street address (P.O. Box		OT DEC 10 AM 11: 20 SECRETAR OF STATE SECRETAR SEE FLORIDA
Tion	ida sireci address (1.0. Dox	HOT acceptable)	
Tamı			
	City, State and Zip)	
If the limited liability company is confirmed that after the change of and the business office of the regliability company it is hereby to of the members of the limited for the operating agreement of the confirmed for t	or changes are made, the Flogistered agent will be identiced on firmed that the change(s) ability company or as otherwellimited liability company.	orida street address of the real. Or, in the case of a Flowas/were authorized by an	registered office orida limited affirmative vote
(Signature of a member or authorized repre	esentative of a member)		
Glenn Pearson			
(Printed or typed name of signee)	<u> </u>		
I hereby accept the appointmen comply with the provisions of all and I am familiar with and acce Chapter 608, F.S. Or, if this do address, I hereby confirm that th	t as registered agent and agi I statules relative to the prop pt the obligations of my posi cument is being filed to mere se limited liability company i	ree to act in this capacity. Per and complete performa Ition as registered agent a Ly reflect a change in the Ly reflect a change in writing	I further agree to ince of my duties, s provided for in registered office g of this change.
(Signature of Rogistered Agent)			
Division of C	orporations, P.O. Box 6327	7, Tallahassee, FL 32314	ļ

FILING FEE: \$25.00

INHS18 (8/05)